

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

ADDRESS (number and street)

PO Box 150064

Check if different  
than previously  
reported. (ACC)

Grand Rapids

MI

49515

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00402800

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2007

through

06

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Stephen Shaff

Signature of Treasurer

Electronically Filed by Stephen Shaff

Date

05

30

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		2307.73
(b) Cash on Hand at Beginning of Reporting Period .....	2307.73	
(c) Total Receipts (from Line 19) .....	135034.67	135034.67
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	137342.40	137342.40
7. Total Disbursements (from Line 31) .....	131321.34	131321.34
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	6021.06	6021.06
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	51970.65	51970.65
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	83064.02	83064.02
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	135034.67	135034.67
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	135034.67	135034.67
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	135034.67	135034.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	135034.67	135034.67

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	128910.09	128910.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	128910.09	128910.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	2411.25	2411.25
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	2411.25	2411.25
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	131321.34	131321.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	131321.34	131321.34

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	135034.67	135034.67
34. Total Contribution Refunds (from Line 28(d)) .....	2411.25	2411.25
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	132623.42	132623.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	128910.09	128910.09
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	128910.09	128910.09

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Lynne M. Banta

Mailing Address 1443 N. Ave 49

City

Los Angeles

State

CA

Zip Code

90042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alhambra Hospital

Occupation

Registered Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.26463

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Lynne M. Banta

Mailing Address 1443 N. Ave 49

City

Los Angeles

State

CA

Zip Code

90042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alhambra Hospital

Occupation

Registered Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.26464

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Lynne M. Banta

Mailing Address 1443 N. Ave 49

City

Los Angeles

State

CA

Zip Code

90042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alhambra Hospital

Occupation

Registered Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.26465

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

2065.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 200

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Lynne M. Banta

Mailing Address 1443 N. Ave 49

City

Los Angeles

State

CA

Zip Code

90042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alhambra Hospital

Occupation

Registered Nurse

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.26466

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mary Barton

Mailing Address 1310 N. Bosart Ave.

City

Indianapolis

State

IN

Zip Code

46201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Attorney

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.22664

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Suzanne Benning

Mailing Address 550 Marine Ave.

City

Manhattan Beach

State

CA

Zip Code

90266

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Writer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.22715

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

325.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Suzanne Benning

Mailing Address 550 Marine Ave.

City

Manhattan Beach

State

CA

Zip Code

90266

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.26474

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Suzanne Benning

Mailing Address 550 Marine Ave.

City

Manhattan Beach

State

CA

Zip Code

90266

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.26475

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Elizabeth Bernreuter

Mailing Address 4322 N. 16th Ave.

City

Phoenix

State

AZ

Zip Code

85015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Phoenix Symphony

Occupation  
Fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.22737

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

545.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Elizabeth Bernreuter

Mailing Address 4322 N. 16th Ave.

City

Phoenix

State

AZ

Zip Code

85015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Phoenix Symphony

Occupation  
Fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.22738

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Elizabeth Bernreuter

Mailing Address 4322 N. 16th Ave.

City

Phoenix

State

AZ

Zip Code

85015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Phoenix Symphony

Occupation  
Fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.22739

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Elizabeth Bernreuter

Mailing Address 4322 N. 16th Ave.

City

Phoenix

State

AZ

Zip Code

85015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Phoenix Symphony

Occupation  
Fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.22740

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Elizabeth Bernreuter

Mailing Address 4322 N. 16th Ave.

City

Phoenix

State

AZ

Zip Code

85015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Phoenix Symphony

Occupation  
Fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.26478

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

William Bianchi

Mailing Address 4141 N. Paulina

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cetrus Belt Teachers Assn.

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.22764

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

William Bianchi

Mailing Address 4141 N. Paulina

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cetrus Belt Teachers Assn.

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.22765

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

105.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

William Bianchi

Mailing Address 4141 N. Paulina

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cetrus Belt Teachers Assn.

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.26482

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

Rusty Bias

Mailing Address 845 Forest Trace Dr.

City

Chesterfield

State

MO

Zip Code

63017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SAVIS

Occupation  
Network Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.22772

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Rusty Bias

Mailing Address 845 Forest Trace Dr.

City

Chesterfield

State

MO

Zip Code

63017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SAVIS

Occupation  
Network Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.22773

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

105.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Rusty Bias

Mailing Address 845 Forest Trace Dr.

City

Chesterfield

State

MO

Zip Code

63017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SAVVIS

Occupation

Network Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.26483

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City

Phoenix

State

AZ

Zip Code

85008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Button-maker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.22816

Amount of Each Receipt this Period

1700.00

**C.**

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City

Phoenix

State

AZ

Zip Code

85008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Button-maker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2515.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.26489

Amount of Each Receipt this Period

815.00

**SUBTOTAL** of Receipts This Page (optional) .....

2565.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Richard Bodlaender

Mailing Address 6009 106th Ave. NE

City

Kirkland

State

WA

Zip Code

98033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.22820

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Jane Bruckel

Mailing Address 3985 Witzel Dr.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 3 / 2 0 0 7

Transaction ID: SA11AI.22863

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Amrita Burdick

Mailing Address 4528 Wyoming St.

City

Kansas City

State

MO

Zip Code

64111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Missouri-Kansas

Occupation  
Medical Librarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.17

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.26507

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

525.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Timothy W. Butcher

Mailing Address 3005 NE 49th St.

City

Vancouver

State

WA

Zip Code

98663

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.22901

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Timothy W. Butcher

Mailing Address 3005 NE 49th St.

City

Vancouver

State

WA

Zip Code

98663

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.22902

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Timothy W. Butcher

Mailing Address 3005 NE 49th St.

City

Vancouver

State

WA

Zip Code

98663

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.22903

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Timothy W. Butcher

Mailing Address 3005 NE 49th St.

City

Vancouver

State

WA

Zip Code

98663

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.22904

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Timothy W. Butcher

Mailing Address 3005 NE 49th St.

City

Vancouver

State

WA

Zip Code

98663

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.22905

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

Timothy W. Butcher

Mailing Address 3005 NE 49th St.

City

Vancouver

State

WA

Zip Code

98663

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.22906

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Timothy W. Butcher

Mailing Address 3005 NE 49th St.

City

Vancouver

State

WA

Zip Code

98663

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.22907

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Bill Calhoun

Mailing Address 1611 Pinehurst Dr.

City

Lady Lake

State

FL

Zip Code

32159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.22933

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Carano

Mailing Address 573 Narragansett Drive

City

Tallmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UPS

Occupation  
Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.22959

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Michael Carano

Mailing Address 573 Narragansett Drive

City

Tallmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UPS

Occupation

Truck Driver

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.22960

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Carano

Mailing Address 573 Narragansett Drive

City

Tallmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UPS

Occupation

Truck Driver

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.22961

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Carano

Mailing Address 573 Narragansett Drive

City

Tallmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UPS

Occupation

Truck Driver

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.22962

Amount of Each Receipt this Period

36.00

**SUBTOTAL** of Receipts This Page (optional) .....

111.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Michael Carano

Mailing Address 573 Narragansett Drive

City

Tallmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UPS

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.22963

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Carano

Mailing Address 573 Narragansett Drive

City

Tallmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UPS

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.26513

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Patrick Carano

Mailing Address 125 Ernest Dr.

City

Tallmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Summit Co. Port Authority

Occupation

Development Coord. & Const. Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 7

Transaction ID: SA11AI.22969

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

125.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Patrick Carano

Mailing Address 125 Ernest Dr.

City

Talmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Summit Co. Port Authority

Occupation

Development Coord. & Const. Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: SA11AI.22970

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Patrick Carano

Mailing Address 125 Ernest Dr.

City

Talmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Summit Co. Port Authority

Occupation

Development Coord. & Const. Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.22971

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Patrick Carano

Mailing Address 125 Ernest Dr.

City

Talmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Summit Co. Port Authority

Occupation

Development Coord. & Const. Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 7

Transaction ID: SA11AI.26514

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

James Carpenter

Mailing Address 1633 N. Prospect Ave. #9C

City

Milwaukee

State

WI

Zip Code

53202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MATL 700

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.22984

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Linda Carraway

Mailing Address 812 W. Ohio Ave.

City

Tampa

State

FL

Zip Code

33603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.26517

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

Alice K. Chan

Mailing Address 788 Belgien Way

City

Sebastopol

State

CA

Zip Code

95472

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.15

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.26523

Amount of Each Receipt this Period

240.00

**SUBTOTAL** of Receipts This Page (optional) .....

780.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Stephen Chase

Mailing Address 424 Walford Rd.

City

Devils Lake

State

ND

Zip Code

58301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: SA11AI.23032

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

David A. Cochran

Mailing Address 31 James St.

City

Morristown

State

NJ

Zip Code

07960

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.26533

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Luis Cuevas

Mailing Address 9507 SW 75th Way

City

Gainesville

State

FL

Zip Code

32608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Transaction ID: SA11AI.23177

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

385.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Luis Cuevas

Mailing Address 9507 SW 75th Way

City

Gainesville

State

FL

Zip Code

32608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.23178

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Luis Cuevas

Mailing Address 9507 SW 75th Way

City

Gainesville

State

FL

Zip Code

32608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.23179

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Luis Cuevas

Mailing Address 9507 SW 75th Way

City

Gainesville

State

FL

Zip Code

32608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.26545

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Andrea Dalessandro

Mailing Address 2214 E. Falcon Vista Dr.

City

Green Valley

State

AZ

Zip Code

85614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.26548

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Allegra Dengler

Mailing Address 60 Judson Ave.

City

Dobbs Ferry

State

NY

Zip Code

10522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Howard Stasson Foundation

Occupation  
Trustee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 7

Transaction ID: SA11AI.26563

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Peter W. Deutsch

Mailing Address 153 Cherry Lane

City

Aliquippa

State

PA

Zip Code

15001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.23284

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

140.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Peter W. Deutsch

Mailing Address 153 Cherry Lane

City

Aliquippa

State

PA

Zip Code

15001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.23285

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Peter W. Deutsch

Mailing Address 153 Cherry Lane

City

Aliquippa

State

PA

Zip Code

15001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.23286

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Peter W. Deutsch

Mailing Address 153 Cherry Lane

City

Aliquippa

State

PA

Zip Code

15001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.26564

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Arthur Dexter

Mailing Address 507 E. Locust #301

City

Des Moines

State

IA

Zip Code

50309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

Transaction ID: SA11AI.23292

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Arthur Dexter

Mailing Address 507 E. Locust #301

City

Des Moines

State

IA

Zip Code

50309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 7

Transaction ID: SA11AI.26565

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Dietz

Mailing Address 3905 Ventura Canyon Ave.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.23298

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Susan Dietz

Mailing Address 3905 Ventura Canyon Ave.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.23299

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Susan Dietz

Mailing Address 3905 Ventura Canyon Ave.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.23300

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Dietz

Mailing Address 3905 Ventura Canyon Ave.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.23301

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Susan Dietz

Mailing Address 3905 Ventura Canyon Ave.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.23302

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Susan Dietz

Mailing Address 3905 Ventura Canyon Ave.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.26568

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Terrence Dillon

Mailing Address 1223 Stannage Ave.

City

Berkely

State

CA

Zip Code

94706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Arborist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.26570

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Herman Dobbs

Mailing Address 3521 Nottingham St.

City

Houston

State

TX

Zip Code

77005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.26577

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

David Ellis

Mailing Address 1927 Antonio Ave.

City

Clovis

State

CA

Zip Code

93611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 7

Transaction ID: SA11AI.26594

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Jodie Evans

Mailing Address 2010 Lunden Ave.

City

Venice

State

CA

Zip Code

90291

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Activist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 0 / 2 0 0 7

Transaction ID: SA11AI.23428

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

2350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Jodie Evans

Mailing Address 2010 Lunden Ave.

City

Venice

State

CA

Zip Code

90291

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Activist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.23429

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Fertik

Mailing Address PO Box 721066

City

Jackson Heights

State

NY

Zip Code

11372

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Business owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.26608

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Robert A. Feuer

Mailing Address PO Box 658

City

Stockbridge

State

MA

Zip Code

01262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.26609

Amount of Each Receipt this Period

108.75

**SUBTOTAL** of Receipts This Page (optional) .....

1608.75

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 200

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Donald T. Foster

Mailing Address 9000 Sunset Blvd., Suite 1500

City

West Hollywood

State

CA

Zip Code

90069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McDermatt & EmeryOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.23525

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Juliet Gorman

Mailing Address 1875 Whitehurst Dr.

City

Monterey Park

State

CA

Zip Code

91755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bill Gorman & Assoc., Inc.Occupation  
Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.26649

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Ira L. Gottlieb

Mailing Address 954 Fiske St.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Taylor, Bush & GeffnerOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.23709

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

775.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Margery Gould

Mailing Address 5671 Spreading Oak Dr.

City

Los Angeles

State

CA

Zip Code

90068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Artist/Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.23720

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Margery Gould

Mailing Address 5671 Spreading Oak Dr.

City

Los Angeles

State

CA

Zip Code

90068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Artist/Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.26650

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

M. Gulick

Mailing Address 7910 129th Dr. SE

City

Snohornish

State

WA

Zip Code

98290

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.23802

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

M. Gulick

Mailing Address 7910 129th Dr. SE

City

Snohomish

State

WA

Zip Code

98290

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.26659

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Maqbool Halepota

Mailing Address 16276 N. 99th Pl.

City

Scottsdale

State

AZ

Zip Code

85260

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.23829

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Heron

Mailing Address 10941 Sproul Ave.

City

Los Angeles

State

CA

Zip Code

90064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CR Management Co.

Occupation  
Real Estate Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.23959

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Judith A. Hess

Mailing Address 2265 Annadale Way

City

Chula Vista

State

CA

Zip Code

91915

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.23964

Amount of Each Receipt this Period

193.40

**B.**

Full Name (Last, First, Middle Initial)

Judith A. Hess

Mailing Address 2265 Annadale Way

City

Chula Vista

State

CA

Zip Code

91915

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.23965

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Judith A. Hess

Mailing Address 2265 Annadale Way

City

Chula Vista

State

CA

Zip Code

91915

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.23966

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

213.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Judith A. Hess

Mailing Address 2265 Annadale Way

City

Chula Vista

State

CA

Zip Code

91915

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.23967

Amount of Each Receipt this Period

7.00

**B.**

Full Name (Last, First, Middle Initial)

Judith A. Hess

Mailing Address 2265 Annadale Way

City

Chula Vista

State

CA

Zip Code

91915

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.23968

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Judith A. Hess

Mailing Address 2265 Annadale Way

City

Chula Vista

State

CA

Zip Code

91915

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.23969

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

37.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Judith A. Hess

Mailing Address 2265 Annadale Way

City

Chula Vista

State

CA

Zip Code

91915

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.23970

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Judith A. Hess

Mailing Address 2265 Annadale Way

City

Chula Vista

State

CA

Zip Code

91915

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.23971

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Judith A. Hess

Mailing Address 2265 Annadale Way

City

Chula Vista

State

CA

Zip Code

91915

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.26683

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

35.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Judith A. Hess

Mailing Address 2265 Annadale Way

City

Chula Vista

State

CA

Zip Code

91915

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.26684

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Ann Hiller

Mailing Address 116 Michael Ln.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.23983

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Ann Hiller

Mailing Address 116 Michael Ln.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.23984

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

85.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Ann Hiller

Mailing Address 116 Michael Ln.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.26685

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

William Honigman

Mailing Address 25182 Mustang Dr.

City

Laguna Hills

State

CA

Zip Code

92653

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
ER Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.80

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11AI.24028

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

William Honigman

Mailing Address 25182 Mustang Dr.

City

Laguna Hills

State

CA

Zip Code

92653

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
ER Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.80

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: SA11AI.24029

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

William Honigman

Mailing Address 25182 Mustang Dr.

City

Laguna Hills

State

CA

Zip Code

92653

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
ER Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 7

Transaction ID: SA11AI.26693

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Karen Hoover

Mailing Address 142 East 16th St. #4A

City

New York

State

NY

Zip Code

10003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYC Health/Hospitals

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.24039

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Karen Hoover

Mailing Address 142 East 16th St. #4A

City

New York

State

NY

Zip Code

10003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYC Health/Hospitals

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.26696

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

80.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.24045

Amount of Each Receipt this Period

70.00

**B.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.24046

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.24047

Amount of Each Receipt this Period

70.00

**SUBTOTAL** of Receipts This Page (optional) .....

160.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.24049

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.24048

Amount of Each Receipt this Period

70.00

**C.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.24051

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

105.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.24052

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.26697

Amount of Each Receipt this Period

70.00

**C.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.26698

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

110.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Joan Hudson-Miller

Mailing Address 3849 Albright Ave.

City

Los Angeles

State

CA

Zip Code

90066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 7

Transaction ID: SA11AI.26704

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Kimberly Hughes

Mailing Address 256 6th Ave. #1

City

Brooklyn

State

NY

Zip Code

11215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.24096

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Marion Jones

Mailing Address 4485 N. Dromedary Rd.

City

Phoenix

State

AZ

Zip Code

85018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.24184

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 200

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Eugene Kadish

Mailing Address PO Box 3183

City

Tempe

State

AZ

Zip Code

85280

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	0	7

Transaction ID: SA11AI.24195

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

David Kelley

Mailing Address 5535 Champion Creek Blvd.

City

Medina

State

OH

Zip Code

44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kelley Shulmond & Co.Occupation  
Pension Evaluator/Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	7

Transaction ID: SA11AI.24251

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

David Kelley

Mailing Address 5535 Champion Creek Blvd.

City

Medina

State

OH

Zip Code

44256

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kelley Shulmond & Co.Occupation  
Pension Evaluator/Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	0	7

Transaction ID: SA11AI.24252

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

2050.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

David Kelley

Mailing Address 5535 Champion Creek Blvd.

City State Zip Code  
 Medina OH 44256

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Kelley Shulmond & Co.

Occupation  
Pension Evaluator/Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.24253

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

David Kelley

Mailing Address 5535 Champion Creek Blvd.

City State Zip Code  
 Medina OH 44256

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Kelley Shulmond & Co.

Occupation  
Pension Evaluator/Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.26724

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Mary Kennedy

Mailing Address c/o Entous  
 16133 Ventura Blvd. #545

City State Zip Code  
 Encino CA 91436

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 2 / 2 0 0 7

Transaction ID: SA11AI.24277

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Mary Kennedy

Mailing Address c/o Entous

16133 Ventura Blvd. #545

City

Encino

State

CA

Zip Code

91436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 7

Transaction ID: SA11AI.26733

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Lorin M. Klugman

Mailing Address 1030 N. State, 4-G

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Web Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.55

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.24340

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Lorin M. Klugman

Mailing Address 1030 N. State, 4-G

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Web Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.55

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.24341

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

95.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Lorin M. Klugman

Mailing Address 1030 N. State, 4-G

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Web Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.55

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

Transaction ID: SA11AI.24342

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Lorin M. Klugman

Mailing Address 1030 N. State, 4-G

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Web Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.55

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 7

Transaction ID: SA11AI.26742

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Martha Koester

Mailing Address 10015 Second Ave. S

City

Seattle

State

WA

Zip Code

98168

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weyergaeyser

Occupation

Chemist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.95

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.24366

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

110.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Martha Koester

Mailing Address 10015 Second Ave. S

City

Seattle

State

WA

Zip Code

98168

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weyergaeyser

Occupation  
Chemist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.95

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.26744

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Martha Koester

Mailing Address 10015 Second Ave. S

City

Seattle

State

WA

Zip Code

98168

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weyergaeyser

Occupation  
Chemist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.95

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.26745

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Bob Kozma

Mailing Address 2151 Filbert St.

City

San Francisco

State

CA

Zip Code

94123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Researcher/Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.24390

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

85.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Bob Kozma

Mailing Address 2151 Filbert St.

City

San Francisco

State

CA

Zip Code

94123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Researcher/Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.26748

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Emmanuel Krasner

Mailing Address 31 Reservoir Rd.

City

Farmington

State

NH

Zip Code

03835

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Krasner Law Office

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.24397

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Emmanuel Krasner

Mailing Address 31 Reservoir Rd.

City

Farmington

State

NH

Zip Code

03835

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Krasner Law Office

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.26749

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

William Lackemacher

Mailing Address Sacramento for Democracy  
24 River Pebble Ct.

City State Zip Code  
Sacramento CA 95833

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Sacramento for Democracy

Occupation  
Communications Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.24426

Amount of Each Receipt this Period

340.00

**B.**

Full Name (Last, First, Middle Initial)

Lisa A. Lilly

Mailing Address 1710 Dollar Lake Dr.

City State Zip Code  
Kent OH 44240

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.24547

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Lisa A. Lilly

Mailing Address 1710 Dollar Lake Dr.

City State Zip Code  
Kent OH 44240

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.15

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.24548

Amount of Each Receipt this Period

57.15

**SUBTOTAL** of Receipts This Page (optional) .....

497.15

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Luke Lundemo

Mailing Address 2807 Old Canton Rd., Suite B

City

Jackson

State

MS

Zip Code

39216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.27

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 0 7

Transaction ID: SA11AI.26788

Amount of Each Receipt this Period

57.10

**B.**

Full Name (Last, First, Middle Initial)

Luke Lundemo

Mailing Address 2807 Old Canton Rd., Suite B

City

Jackson

State

MS

Zip Code

39216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.27

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.26789

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Martha J. Madison

Mailing Address 4119 W. 173rd Pl.

City

Torrance

State

CA

Zip Code

90504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.24

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.24658

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional) .....

122.10

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Martha J. Madison

Mailing Address 4119 W. 173rd Pl.

City

Torrance

State

CA

Zip Code

90504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.24

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.24659

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Rueben Martinez

Mailing Address 1110 N. Main St.

City

Santa Ana

State

CA

Zip Code

92701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Bookstore owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.24734

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Dinah L. Mason

Mailing Address 217 La Marina Dr.

City

Santa Barbara

State

CA

Zip Code

93109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.25

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.24744

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

515.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Richard Mazess

Mailing Address 1015 Hot Springs Lane

City

Santa Barbara

State

CA

Zip Code

93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.24760

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Melanie McAfee

Mailing Address 6315 Spicewood Springs

City

Austin

State

TX

Zip Code

78759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Caterer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.24767

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Melanie McAfee

Mailing Address 6315 Spicewood Springs

City

Austin

State

TX

Zip Code

78759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Caterer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.26820

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

5100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Michele McFadden

Mailing Address 1124 E. Timber Ridge Rd.

City

Prescott

State

AZ

Zip Code

86303

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.26825

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Susan Meade Sanders

Mailing Address 24951 Beachwalk Way

City

Dana Point

State

CA

Zip Code

92629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.25527

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

Anne Meara

Mailing Address 118 Riverside Dr., #5A

City

New York

State

NY

Zip Code

10024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Stiller & Meara Entertainment

Occupation  
Actor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 3 / 2 0 0 7

Transaction ID: SA11AI.24866

Amount of Each Receipt this Period

3000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Mary F. Nichols

Mailing Address 739 Lincoln Ave.

City

Cuyahoga Falls

State

OH

Zip Code

44221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.25055

Amount of Each Receipt this Period

94.20

**B.**

Full Name (Last, First, Middle Initial)

Daniel A. O'Neal

Mailing Address 3731 E. Redfield Rd.

City

Gilbert

State

AZ

Zip Code

85234

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11AI.25091

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

Daniel A. O'Neal

Mailing Address 3731 E. Redfield Rd.

City

Gilbert

State

AZ

Zip Code

85234

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Transaction ID: SA11AI.25092

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

174.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Daniel A. O'Neal

Mailing Address 3731 E. Redfield Rd.

City

Gilbert

State

AZ

Zip Code

85234

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.25093

Amount of Each Receipt this Period

45.00

**B.**

Full Name (Last, First, Middle Initial)

Dennis K Obduskey

Mailing Address PO Box 697

City

Pine

State

CO

Zip Code

80421

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Denver Investment Advisors  
LLC

Occupation  
Department Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.25113

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)

Dennis K Obduskey

Mailing Address PO Box 697

City

Pine

State

CO

Zip Code

80421

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Denver Investment Advisors  
LLC

Occupation  
Department Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.25114

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

185.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 200

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Susan Oehler

Mailing Address 2605 Vineyard Blvd.

City

Asheville

State

NC

Zip Code

28805

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pinellas County SchoolsOccupation  
Buyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.05

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.25122

Amount of Each Receipt this Period

47.05

**B.**

Full Name (Last, First, Middle Initial)

Susan Oehler

Mailing Address 2605 Vineyard Blvd.

City

Asheville

State

NC

Zip Code

28805

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pinellas County SchoolsOccupation  
Buyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.05

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.25123

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Oehler

Mailing Address 2605 Vineyard Blvd.

City

Asheville

State

NC

Zip Code

28805

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pinellas County SchoolsOccupation  
Buyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.05

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.26870

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

97.05

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Wayne Parton

Mailing Address 1797 Wilshire Lane

City State Zip Code  
 Decatur GA 30023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Psychiatrists Only

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.26880

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

Susan Patlove

Mailing Address 23 Windy Hill Rd.

City State Zip Code  
 Shelburne Falls MA 01370

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.25188

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Patlove

Mailing Address 23 Windy Hill Rd.

City State Zip Code  
 Shelburne Falls MA 01370

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.26881

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

385.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Rhea Perlman

Mailing Address PO Box 491246

City

Los Angeles

State

CA

Zip Code

90049

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Actor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.25221

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Suzanne Peterson

Mailing Address 32 Ward Ave.

City

Northampton

State

MA

Zip Code

01060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
John Bonifaz Campaign

Occupation  
Political Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1820.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.25253

Amount of Each Receipt this Period

1700.00

**C.**

Full Name (Last, First, Middle Initial)

Thomas Plaut

Mailing Address 125 Red Gate Lane

City

Amherst

State

MA

Zip Code

01002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.25275

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

7700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Thomas Plaut

Mailing Address 125 Red Gate Lane

City

Amherst

State

MA

Zip Code

01002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 3 / 2 0 0 7

Transaction ID: SA11AI.25276

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Thomas Plaut

Mailing Address 125 Red Gate Lane

City

Amherst

State

MA

Zip Code

01002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.26890

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Mervis Reissig

Mailing Address 4222 Primrose Ave.

City

Santa Rosa

State

CA

Zip Code

95407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Project Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11AI.25379

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1400.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 200

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Mervis Reissig

Mailing Address 4222 Primrose Ave.

City

Santa Rosa

State

CA

Zip Code

95407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Project Leader

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 8 / 2 0 0 7

Transaction ID: SA11AI.25380

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Mervis Reissig

Mailing Address 4222 Primrose Ave.

City

Santa Rosa

State

CA

Zip Code

95407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Project Leader

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.25381

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Mervis Reissig

Mailing Address 4222 Primrose Ave.

City

Santa Rosa

State

CA

Zip Code

95407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Project Leader

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

Transaction ID: SA11AI.25382

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional) .....

90.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Mervis Reissig

Mailing Address 4222 Primrose Ave.

City

Santa Rosa

State

CA

Zip Code

95407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Project Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 7

Transaction ID: SA11AI.26901

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Mervis Reissig

Mailing Address 4222 Primrose Ave.

City

Santa Rosa

State

CA

Zip Code

95407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Project Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.26902

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Mervis Reissig

Mailing Address 4222 Primrose Ave.

City

Santa Rosa

State

CA

Zip Code

95407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Project Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.26903

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

255.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Robert Reveles

Mailing Address 10904 E. Sleepy Hollow Trail

City State Zip Code  
Gold Canyon AZ 85218

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 19 2007

Transaction ID: SA11AI.25389

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Scott Ruffner

Mailing Address PO Box 1867

City State Zip Code  
Bangor ME 04402

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 14 2007

Transaction ID: SA11AI.26931

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Anthony Saily

Mailing Address 435 S. Lafayette Pl.

City State Zip Code  
Los Angeles CA 90057

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 23 2007

Transaction ID: SA11AI.25516

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1525.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

John A. Schira

Mailing Address 5147 White Pine Dr.

City State Zip Code  
 Brunswick OH 44212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Maxxeon

Occupation  
Director of Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.25567

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

John A. Schira

Mailing Address 5147 White Pine Dr.

City State Zip Code  
 Brunswick OH 44212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Maxxeon

Occupation  
Director of Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.26945

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

A. Shallal

Mailing Address 8461 Chapelwood Ct.

City State Zip Code  
 Annandale VA 22003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.25622

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Randolph Shannon

Mailing Address 600 13th Ave.

City

New Brighton

State

PA

Zip Code

15066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PMET Inc.

Occupation

Laboratory Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.25626

Amount of Each Receipt this Period

120.00

**B.**

Full Name (Last, First, Middle Initial)

Randolph Shannon

Mailing Address 600 13th Ave.

City

New Brighton

State

PA

Zip Code

15066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PMET Inc.

Occupation

Laboratory Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.25627

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

Randolph Shannon

Mailing Address 600 13th Ave.

City

New Brighton

State

PA

Zip Code

15066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PMET Inc.

Occupation

Laboratory Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.25628

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional) .....

270.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Randolph Shannon

Mailing Address 600 13th Ave.

City

New Brighton

State

PA

Zip Code

15066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PMET Inc.

Occupation

Laboratory Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 0 7

Transaction ID: SA11AI.26960

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Shelby

Mailing Address 10618 N. 8th St.

City

Phoenix

State

AZ

Zip Code

85020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Disabled

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.25639

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Shelby

Mailing Address 10618 N. 8th St.

City

Phoenix

State

AZ

Zip Code

85020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Disabled

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.26965

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

125.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Cynthia Sherbin

Mailing Address 18 Stoneybrook Lane

City

Malvern

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.25657

Amount of Each Receipt this Period

120.00

**B.**

Full Name (Last, First, Middle Initial)

David Simpkin

Mailing Address 40 Old Bridge St. N

City

Pelham

State

NH

Zip Code

03076

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Car Component Technologies  
Inc

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.26975

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

David R. Sonneborn

Mailing Address 1183 Navarro Pl.

City

Orange

State

CA

Zip Code

92869

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of CA Irvine

Occupation

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.25765

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

260.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

David R. Sonneborn

Mailing Address 1183 Navarro Pl.

City

Orange

State

CA

Zip Code

92869

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of CA Irvine

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.25766

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

David R. Sonneborn

Mailing Address 1183 Navarro Pl.

City

Orange

State

CA

Zip Code

92869

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of CA Irvine

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.26988

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Ronald Swan

Mailing Address R. R. 2 Box 22

City

Cibola

State

AZ

Zip Code

85328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Rancher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.25875

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1040.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Anna Swanson

Mailing Address 2502 Lake Ave.

City

Cheverly

State

MD

Zip Code

20785

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.25879

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Jonathan Tasini

Mailing Address 739 W. 186th St. - 1A

City

New York

State

NY

Zip Code

10033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.25906

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Jonathan Tasini

Mailing Address 739 W. 186th St. - 1A

City

New York

State

NY

Zip Code

10033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.25907

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Jonathan Tasini

Mailing Address 739 W. 186th St. - 1A

City

New York

State

NY

Zip Code

10033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.27020

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Vern O. Taylor

Mailing Address 11818 Victoria Ave.

City

Los Angeles

State

CA

Zip Code

90066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Vern Taylor & Assoc. Inc.

Occupation  
Unknown

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.25924

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Vern O. Taylor

Mailing Address 11818 Victoria Ave.

City

Los Angeles

State

CA

Zip Code

90066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Vern Taylor & Assoc. Inc.

Occupation  
Unknown

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.25925

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

225.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

William Taylor

Mailing Address 2645 Peters Rd.

City

Dexter

State

MI

Zip Code

48130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Colorbok

Occupation

President, CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 2 / 2 0 0 7

Transaction ID: SA11AI.27021

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Tullius

Mailing Address 5229 Balboa Blvd., Unit 13

City

Encino

State

CA

Zip Code

91316

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.27037

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Naida C. Tushnet

Mailing Address 601 John K Dr. #101

City

Los Alamitos

State

CA

Zip Code

90720

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
West Ed.

Occupation

Ed Research

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.26029

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

175.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Naida C. Tushnet

Mailing Address 601 John K Dr. #101

City

Los Alamitos

State

CA

Zip Code

90720

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
West Ed.

Occupation

Ed Research

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.27040

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Linda Vaccarezza

Mailing Address 201 E. Watmaugh Rd.

City

Sonoma

State

CA

Zip Code

95476

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Court Reporter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.26050

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Linda Vaccarezza

Mailing Address 201 E. Watmaugh Rd.

City

Sonoma

State

CA

Zip Code

95476

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Court Reporter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.27046

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Martha L. Ward

Mailing Address 924 Shaw Circle

City

Melbourne

State

FL

Zip Code

32940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.26130

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Martha L. Ward

Mailing Address 924 Shaw Circle

City

Melbourne

State

FL

Zip Code

32940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.26131

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Martha L. Ward

Mailing Address 924 Shaw Circle

City

Melbourne

State

FL

Zip Code

32940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.27054

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Bill Weiss

Mailing Address 33 Fairemir Dr.

City

Morgantown

State

WV

Zip Code

26501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.26152

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Rita Williams

Mailing Address 435 N. Layton Way

City

Los Angeles

State

CA

Zip Code

90049

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.26221

Amount of Each Receipt this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)

Rita Williams

Mailing Address 435 N. Layton Way

City

Los Angeles

State

CA

Zip Code

90049

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 7

Transaction ID: SA11AI.27080

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 200

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Teddi Winograd

Mailing Address 954 Fiske St.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 2 / 2 0 0 7

Transaction ID: SA11AI.26253

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

Teddi Winograd

Mailing Address 954 Fiske St.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 3 / 2 0 0 7

Transaction ID: SA11AI.26254

Amount of Each Receipt this Period

600.00

**C.**

Full Name (Last, First, Middle Initial)

Japeh Youssefi

Mailing Address 13639 E. Desert Trail

City

Scottsdale

State

AZ

Zip Code

85259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ISmart, LLC

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.26327

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

2850.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 200

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Roberto Zarate

Mailing Address 4141 Cambridge Rd.

City

La Canada Flt

State

CA

Zip Code

91011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCLA

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.26337

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Roberto Zarate

Mailing Address 4141 Cambridge Rd.

City

La Canada Flt

State

CA

Zip Code

91011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCLA

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 0 7

Transaction ID: SA11AI.27094

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

John Ziskowski

Mailing Address 25-12 Deerwood Lane

City

Waterbury

State

CT

Zip Code

06704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NOAA

Occupation

Fishery Biologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.26361

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

150.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 200

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

John Ziskowski

Mailing Address 25-12 Deerwood Lane

City

Waterbury

State

CT

Zip Code

06704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NOAA

Occupation

Fishery Biologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.27097

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) ▶

50.00

TOTAL This Period (last page this line number only) ▶

51970.65

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 77 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26387

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

30.30

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26388

Date of Disbursement

04 / 27 / 2007

Amount of Each Disbursement this Period

4.50

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26389

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

45.31

SUBTOTAL of Disbursements This Page (optional) .....

80.11

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 78 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address 70100 AXP Financial Center</p> <p>City Minneapolis State MN Zip Code 55474</p> <p>Purpose of Disbursement CC fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.26390</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4.50"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address 70100 AXP Financial Center</p> <p>City Minneapolis State MN Zip Code 55474</p> <p>Purpose of Disbursement CC fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.26391</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="64.58"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address 70100 AXP Financial Center</p> <p>City Minneapolis State MN Zip Code 55474</p> <p>Purpose of Disbursement CC fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27531</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4.50"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**73.58**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 79 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Amtrak

Mailing Address 900 2nd St. NE

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement  
Travel for director

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.27533

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
Bank fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.26416

Date of Disbursement

01 / 02 / 2007

Amount of Each Disbursement this Period

368.43

**C.**

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
Chargeback

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.34396

Date of Disbursement

01 / 05 / 2007

Amount of Each Disbursement this Period

40.00

**SUBTOTAL** of Disbursements This Page (optional) .....

450.43

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 80 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement

Bank fees

Candidate Name

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.27099

Date of Disbursement

01 / 12 / 2007

Amount of Each Disbursement this Period

2.00

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement

Check reorder

Candidate Name

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.27100

Date of Disbursement

01 / 18 / 2007

Amount of Each Disbursement this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement

ATM fee

Candidate Name

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.27126

Date of Disbursement

01 / 30 / 2007

Amount of Each Disbursement this Period

2.00

**SUBTOTAL** of Disbursements This Page (optional) .....

19.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 81 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27101

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

330.11

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
ATM Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27127

Date of Disbursement

02 / 02 / 2007

Amount of Each Disbursement this Period

2.00

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
ATM fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27130

Date of Disbursement

02 / 05 / 2007

Amount of Each Disbursement this Period

2.00

SUBTOTAL of Disbursements This Page (optional) .....

334.11

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255Purpose of Disbursement  
ATM Fee

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27132

Date of Disbursement

M M / D D / Y Y Y Y  
0 2 / 0 5 / 2 0 0 7

Amount of Each Disbursement this Period

2.00

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255Purpose of Disbursement  
Bank charge

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27102

Date of Disbursement

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 0 7

Amount of Each Disbursement this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255Purpose of Disbursement  
Bank charge

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27103

Date of Disbursement

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 0 7

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional) ▶

32.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255

Purpose of Disbursement

Bank charges

Candidate Name

001

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Transaction ID: SB21B.27104

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	1	/	2	0	0	7

Amount of Each Disbursement this Period

398.08

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255

Purpose of Disbursement

Bank charges

Candidate Name

001

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Transaction ID: SB21B.27105

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	7

Amount of Each Disbursement this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255

Purpose of Disbursement

ATM fee

Candidate Name

001

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Transaction ID: SB21B.27135

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	2	/	2	0	0	7

Amount of Each Disbursement this Period

2.00

SUBTOTAL of Disbursements This Page (optional) .....

600.08

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255Purpose of Disbursement  
ATM fee

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27136

Date of Disbursement

03 / 22 / 2007

Amount of Each Disbursement this Period

2.00

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255Purpose of Disbursement  
Bank charges

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27106

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

410.94

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255Purpose of Disbursement  
Bank charges

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27107

Date of Disbursement

04 / 10 / 2007

Amount of Each Disbursement this Period

74.70

SUBTOTAL of Disbursements This Page (optional) .....

487.64

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 85 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
Bank charges - wire transfer

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27108

Date of Disbursement

04 / 20 / 2007

Amount of Each Disbursement this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
ATM fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27137

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

2.00

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
ATM fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27138

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

2.00

SUBTOTAL of Disbursements This Page (optional) ▶

29.00

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 86 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement

Bank fees

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27109

Date of Disbursement

04 / 27 / 2007

Amount of Each Disbursement this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement

Bank fees

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27110

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

587.01

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement

Bank fees

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27111

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional) .....

622.01

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 87 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address 100 N. Tryon St.</p> <p>City Charlotte State NC Zip Code 28255</p> <p>Purpose of Disbursement Bank fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27112</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address 100 N. Tryon St.</p> <p>City Charlotte State NC Zip Code 28255</p> <p>Purpose of Disbursement Bank fees - checks</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27113</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="38.77"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address 100 N. Tryon St.</p> <p>City Charlotte State NC Zip Code 28255</p> <p>Purpose of Disbursement Bank fees -returned checks</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.27541</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5.00"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**48.77**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 88 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
Bank fees - returned checks

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27542

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

5.00

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
Bank fees

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27543

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

803.91

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
Bank fees

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27544

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

10.00

**SUBTOTAL** of Disbursements This Page (optional) .....

818.91

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 89 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255

Purpose of Disbursement

Bank fees

Candidate Name

001

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Transaction ID: SB21B.27545

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	7	

Amount of Each Disbursement this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255

Purpose of Disbursement

Bank fees

Candidate Name

001

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Transaction ID: SB21B.27546

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	7	

Amount of Each Disbursement this Period

930.00

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255

Purpose of Disbursement

Bank fees

Candidate Name

001

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Transaction ID: SB21B.27547

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	7	

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional) .....

950.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 90 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement

Bank fees

Candidate Name

001

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.27548

Date of Disbursement

06 / 29 / 2007

Amount of Each Disbursement this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Best Western

Mailing Address Orange County Airport  
2700 Hotel Terrace

City  
Santa Ana

State  
CA

Zip Code  
92705

Purpose of Disbursement

Hotel for CA convention

Candidate Name

002

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.26415

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

613.29

C.

Full Name (Last, First, Middle Initial)

BloggerPower.org

Mailing Address 5758 Geary Blvd.  
PMB 303

City  
San Francisco

State  
CA

Zip Code  
94121

Purpose of Disbursement

Tabling fees

Candidate Name

004

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.27539

Date of Disbursement

06 / 07 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1123.29

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 91 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

BloggerPower.org

Mailing Address 5758 Geary Blvd.  
PMB 303

City San Francisco State CA Zip Code 94121

Purpose of Disbursement  
Admission to KOS convention

Candidate Name

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27540

Date of Disbursement

06 / 29 / 2007

Amount of Each Disbursement this Period

275.00

B.

Full Name (Last, First, Middle Initial)

Roger Bloom

Mailing Address 218A 19h St.

City Huntington Beach State CA Zip Code 92648

Purpose of Disbursement  
Consultant fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27355

Date of Disbursement

01 / 16 / 2007

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Roger Bloom

Mailing Address 218A 19h St.

City Huntington Beach State CA Zip Code 92648

Purpose of Disbursement  
Consultant fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27356

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) .....

775.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 92 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Roger Bloom

Mailing Address 218A 19h St.

City  
Huntington Beach

State  
CA

Zip Code  
92648

Purpose of Disbursement  
Consultant fee

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27357

Date of Disbursement

02 / 16 / 2007

Amount of Each Disbursement this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
January Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26394

Date of Disbursement

01 / 16 / 2007

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
January Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26395

Date of Disbursement

01 / 16 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1150.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 93 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
PhoenixState  
AZZip Code  
85008Purpose of Disbursement  
January Salary

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26396

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	1	/	2	0	0	7

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
PhoenixState  
AZZip Code  
85008Purpose of Disbursement  
February Salary

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26397

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	7

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
PhoenixState  
AZZip Code  
85008Purpose of Disbursement  
February Salary

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26398

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	7

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 94 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
February Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26399

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
March Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26400

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
March Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26401

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 95 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Online store order fulfillment

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26402

Date of Disbursement

03 / 22 / 2007

Amount of Each Disbursement this Period

46.00

**B.**

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
March Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26403

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Reimbursement for postage

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26404

Date of Disbursement

04 / 12 / 2007

Amount of Each Disbursement this Period

18.45

**SUBTOTAL** of Disbursements This Page (optional) .....

1064.45

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 96 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
April Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26405

Date of Disbursement

04 / 16 / 2007

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Online store fulfillment

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26406

Date of Disbursement

04 / 28 / 2007

Amount of Each Disbursement this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
April Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26407

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

2042.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 97 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
May Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26408

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
May Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26409

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Online store fulfillment

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.26410

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

176.00

SUBTOTAL of Disbursements This Page (optional) ▶

1176.00

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 98 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
May Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27534

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Online store order fulfillment

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27535

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
June Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27536

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

2040.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 99 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Online store order fulfillment

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27537

Date of Disbursement

06 / 25 / 2007

Amount of Each Disbursement this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Sherry Bohlen

Mailing Address 14021 E. Becker Lane

City  
Scottsdale

State  
AZ

Zip Code  
85259

Purpose of Disbursement  
Reimbursement for cell and internet

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27525

Date of Disbursement

02 / 09 / 2007

Amount of Each Disbursement this Period

200.62

**C.**

Full Name (Last, First, Middle Initial)

Sherry Bohlen

Mailing Address 14021 E. Becker Lane

City  
Scottsdale

State  
AZ

Zip Code  
85259

Purpose of Disbursement  
February Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27366

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2220.62

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 100 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Sherry Bohlen

Mailing Address 14021 E. Becker Lane

City  
Scottsdale

State  
AZ

Zip Code  
85259

Purpose of Disbursement  
ATM withdrawal for taxi expense

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27133

Date of Disbursement

03 / 22 / 2007

Amount of Each Disbursement this Period

62.00

B.

Full Name (Last, First, Middle Initial)

Sherry Bohlen

Mailing Address 14021 E. Becker Lane

City  
Scottsdale

State  
AZ

Zip Code  
85259

Purpose of Disbursement  
ATM withdrawal for taxi expense

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27134

Date of Disbursement

03 / 22 / 2007

Amount of Each Disbursement this Period

22.00

C.

Full Name (Last, First, Middle Initial)

Sherry Bohlen

Mailing Address 14021 E. Becker Lane

City  
Scottsdale

State  
AZ

Zip Code  
85259

Purpose of Disbursement  
April Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27367

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) .....

2084.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 101 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Laura Bonham

Mailing Address PO Box 976

City  
Coalville

State  
UT

Zip Code  
84017

Purpose of Disbursement  
January Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27318

Date of Disbursement

01 / 16 / 2007

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Laura Bonham

Mailing Address PO Box 976

City  
Coalville

State  
UT

Zip Code  
84017

Purpose of Disbursement  
Airfare reimbursement

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27521

Date of Disbursement

01 / 23 / 2007

Amount of Each Disbursement this Period

238.90

C.

Full Name (Last, First, Middle Initial)

Laura Bonham

Mailing Address PO Box 976

City  
Coalville

State  
UT

Zip Code  
84017

Purpose of Disbursement  
February Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27319

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1238.90

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 102 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Laura Bonham

Mailing Address PO Box 976

City  
Coalville

State  
UT

Zip Code  
84017

Purpose of Disbursement  
February Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27321

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Laura Bonham

Mailing Address PO Box 976

City  
Coalville

State  
UT

Zip Code  
84017

Purpose of Disbursement  
March Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27322

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Laura Bonham

Mailing Address PO Box 976

City  
Coalville

State  
UT

Zip Code  
84017

Purpose of Disbursement  
March Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27323

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 103 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Laura Bonham

Mailing Address PO Box 976

City  
Coalville

State  
UT

Zip Code  
84017

Purpose of Disbursement  
April Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27324

Date of Disbursement

04 / 16 / 2007

Amount of Each Disbursement this Period

750.00

B.

Full Name (Last, First, Middle Initial)

Laura Bonham

Mailing Address PO Box 976

City  
Coalville

State  
UT

Zip Code  
84017

Purpose of Disbursement  
April Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27325

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

750.00

C.

Full Name (Last, First, Middle Initial)

Laura Bonham

Mailing Address PO Box 976

City  
Coalville

State  
UT

Zip Code  
84017

Purpose of Disbursement  
June Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27591

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional) .....

2250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 104 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Bryan Buchan

Mailing Address 3037 Crisfield Dr. NE

City  
Grand Rapids

State  
MI

Zip Code  
49525

Purpose of Disbursement  
January Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.27114

Date of Disbursement

01 / 16 / 2007

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Bryan Buchan

Mailing Address 3037 Crisfield Dr. NE

City  
Grand Rapids

State  
MI

Zip Code  
49525

Purpose of Disbursement  
January Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.27115

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Bryan Buchan

Mailing Address 3037 Crisfield Dr. NE

City  
Grand Rapids

State  
MI

Zip Code  
49525

Purpose of Disbursement  
February Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.27116

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) ▶

1500.00

**TOTAL** This Period (last page this line number only) ▶



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 105 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Bryan Buchan

Mailing Address 3037 Crisfield Dr. NE

City  
Grand Rapids

State  
MI

Zip Code  
49525

Purpose of Disbursement  
February Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27117

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Bryan Buchan

Mailing Address 3037 Crisfield Dr. NE

City  
Grand Rapids

State  
MI

Zip Code  
49525

Purpose of Disbursement  
March Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27119

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Bryan Buchan

Mailing Address 3037 Crisfield Dr. NE

City  
Grand Rapids

State  
MI

Zip Code  
49525

Purpose of Disbursement  
April Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27120

Date of Disbursement

04 / 24 / 2007

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 106 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bryan Buchan

Mailing Address 3037 Crisfield Dr. NE

City Grand Rapids State MI Zip Code 49525

Purpose of Disbursement

May Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27121

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Bryan Buchan

Mailing Address 3037 Crisfield Dr. NE

City Grand Rapids State MI Zip Code 49525

Purpose of Disbursement

June Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27549

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Kimberly Buchan

Mailing Address 3037 Crisfield Dr. NE

City Grand Rapids State MI Zip Code 49525

Purpose of Disbursement

January Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27310

Date of Disbursement

01 / 16 / 2007

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) .....

1250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 107 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Kimberly Buchan

Mailing Address 3037 Crisfield Dr. NE

City Grand Rapids State MI Zip Code 49525

Purpose of Disbursement  
February Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27311

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Kimberly Buchan

Mailing Address 3037 Crisfield Dr. NE

City Grand Rapids State MI Zip Code 49525

Purpose of Disbursement  
March Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27312

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Kimberly Buchan

Mailing Address 3037 Crisfield Dr. NE

City Grand Rapids State MI Zip Code 49525

Purpose of Disbursement  
April Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27313

Date of Disbursement

04 / 16 / 2007

Amount of Each Disbursement this Period

125.00

SUBTOTAL of Disbursements This Page (optional) .....

625.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 108 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Kimberly Buchan

Mailing Address 3037 Crisfield Dr. NE

City Grand Rapids State MI Zip Code 49525

Purpose of Disbursement  
April Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27314

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Kimberly Buchan

Mailing Address 3037 Crisfield Dr. NE

City Grand Rapids State MI Zip Code 49525

Purpose of Disbursement  
May Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27315

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Kimberly Buchan

Mailing Address 3037 Crisfield Dr. NE

City Grand Rapids State MI Zip Code 49525

Purpose of Disbursement  
May Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27588

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

125.00

SUBTOTAL of Disbursements This Page (optional) .....

375.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 109 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Kimberly Buchan

Mailing Address 3037 Crisfield Dr. NE

City State Zip Code  
Grand Rapids MI 49525

Purpose of Disbursement

June Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27589

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Kimberly Buchan

Mailing Address 3037 Crisfield Dr. NE

City State Zip Code  
Grand Rapids MI 49525

Purpose of Disbursement

June Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27590

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Capitol Advantage

Mailing Address 2751 Prosperity Ave., Suite 600

City State Zip Code  
Fairfax VA 22031

Purpose of Disbursement

Capitol Directory Service

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27123

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional) .....

1875.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
January Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27404

Date of Disbursement

02 / 02 / 2007

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
ATM withdrawal for taxi expense

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27129

Date of Disbursement

02 / 05 / 2007

Amount of Each Disbursement this Period

103.00

C.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
Cell phone reimbursement

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27526

Date of Disbursement

03 / 13 / 2007

Amount of Each Disbursement this Period

172.51

SUBTOTAL of Disbursements This Page (optional) .....

5275.51

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
February Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27405

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
March Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27406

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
ATM withdrawal for taxi expense

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27139

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

102.00

SUBTOTAL of Disbursements This Page (optional) .....

10102.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 112 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
FlorenceState  
MAZip Code  
01062Purpose of Disbursement  
ATM withdrawal for taxi expense

Candidate Name

002

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27140

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	0	7

Amount of Each Disbursement this Period

27.00

B.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
FlorenceState  
MAZip Code  
01062Purpose of Disbursement  
April Salary

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27407

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	2	/	2	0	0	7

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
FlorenceState  
MAZip Code  
01062Purpose of Disbursement  
May Salary

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27604

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	5	/	2	0	0	7

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) .....

10027.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
Cell phone reimbursement

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27605

Date of Disbursement

/   /

Amount of Each Disbursement this Period

461.22

**B.**

Full Name (Last, First, Middle Initial)

Cheap Tickets

Mailing Address 801 Royal Pkwy., 3200

City  
Nashville

State  
TN

Zip Code  
37214

Purpose of Disbursement  
Sherry to DC

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27143

Date of Disbursement

/   /

Amount of Each Disbursement this Period

363.60

**C.**

Full Name (Last, First, Middle Initial)

Scott Clingan

Mailing Address 11233 Lelani Dr.

City  
La Mesa

State  
CA

Zip Code  
91941

Purpose of Disbursement  
Impeach t-shirts

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27358

Date of Disbursement

/   /

Amount of Each Disbursement this Period

550.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1374.82

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Scott Clingan

Mailing Address 11233 Lelani Dr.

City  
La Mesa

State  
CA

Zip Code  
91941

Purpose of Disbursement

Impeach t-shirts

Candidate Name

003

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.27360

Date of Disbursement

04 / 12 / 2007

Amount of Each Disbursement this Period

550.00

B.

Full Name (Last, First, Middle Initial)

Scott Clingan

Mailing Address 11233 Lelani Dr.

City  
La Mesa

State  
CA

Zip Code  
91941

Purpose of Disbursement

Impeach t-shirts

Candidate Name

003

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.27361

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

587.75

C.

Full Name (Last, First, Middle Initial)

Clothing of the American Mind

Mailing Address 8936 Venice Blvd.

City  
Culver City

State  
CA

Zip Code  
90232

Purpose of Disbursement

Payment for t-shirts

Candidate Name

003

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.27484

Date of Disbursement

04 / 09 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1637.75

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Clothing of the American Mind

Mailing Address 8936 Venice Blvd.

City  
Culver City

State  
CA

Zip Code  
90232

Purpose of Disbursement  
T-shirts

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27552

Date of Disbursement

06 / 07 / 2007

Amount of Each Disbursement this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Jeff Cohen

Mailing Address PO Box 1152

City  
Woodstock

State  
NY

Zip Code  
12498

Purpose of Disbursement  
Consultant Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27300

Date of Disbursement

01 / 16 / 2007

Amount of Each Disbursement this Period

1250.00

**C.**

Full Name (Last, First, Middle Initial)

Jeff Cohen

Mailing Address PO Box 1152

City  
Woodstock

State  
NY

Zip Code  
12498

Purpose of Disbursement  
Consultant Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27301

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

1250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Jeff Cohen

Mailing Address PO Box 1152

City  
Woodstock

State  
NY

Zip Code  
12498

Purpose of Disbursement  
Consultant Fee

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27302

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1250.00

B.

Full Name (Last, First, Middle Initial)

Jeff Cohen

Mailing Address PO Box 1152

City  
Woodstock

State  
NY

Zip Code  
12498

Purpose of Disbursement  
Reimbursement for taxi

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27519

Date of Disbursement

/   /

Amount of Each Disbursement this Period

98.50

C.

Full Name (Last, First, Middle Initial)

Jeff Cohen

Mailing Address PO Box 1152

City  
Woodstock

State  
NY

Zip Code  
12498

Purpose of Disbursement  
Consultant Fee

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27303

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2598.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Jeff Cohen

Mailing Address PO Box 1152

City  
Woodstock

State  
NY

Zip Code  
12498

Purpose of Disbursement  
Consultant Fee

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27304

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

1250.00

B.

Full Name (Last, First, Middle Initial)

Jeff Cohen

Mailing Address PO Box 1152

City  
Woodstock

State  
NY

Zip Code  
12498

Purpose of Disbursement  
Travel reimbursements

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27520

Date of Disbursement

04 / 12 / 2007

Amount of Each Disbursement this Period

608.62

C.

Full Name (Last, First, Middle Initial)

Collective Copy

Mailing Address 93 Main St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
Business cards

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27486

Date of Disbursement

02 / 09 / 2007

Amount of Each Disbursement this Period

136.47

SUBTOTAL of Disbursements This Page (optional) .....

1995.09

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Collective Copy

Mailing Address 93 Main St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
Copies for events

Candidate Name

004

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27487

Date of Disbursement

03 / 13 / 2007

Amount of Each Disbursement this Period

62.16

**B.**

Full Name (Last, First, Middle Initial)

Collective Copy

Mailing Address 93 Main St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
Business cards

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27488

Date of Disbursement

04 / 09 / 2007

Amount of Each Disbursement this Period

146.95

**C.**

Full Name (Last, First, Middle Initial)

Comcast

Mailing Address PO Box 1577

City  
Newark

State  
NJ

Zip Code  
07101

Purpose of Disbursement  
Cable-Internet for Director

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27152

Date of Disbursement

04 / 16 / 2007

Amount of Each Disbursement this Period

100.56

**SUBTOTAL** of Disbursements This Page (optional) .....

309.67

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 119 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Comcast

Mailing Address PO Box 1577

City  
Newark

State  
NJ

Zip Code  
07101

Purpose of Disbursement  
Cable-Internet for Director

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27153

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

201.12

B.

Full Name (Last, First, Middle Initial)

Days Inn

Mailing Address 4400 Connecticut, NW

City  
Washington

State  
DC

Zip Code  
20008

Purpose of Disbursement  
Hotel for DC event

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27163

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

398.47

C.

Full Name (Last, First, Middle Initial)

Days Inn

Mailing Address 4400 Connecticut, NW

City  
Washington

State  
DC

Zip Code  
20008

Purpose of Disbursement  
Hotel for DC event

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27164

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

216.41

SUBTOTAL of Disbursements This Page (optional) .....

816.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 120 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Days Inn

Mailing Address 4400 Connecticut, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Hotel for DC event

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27165

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

159.16

**B.**

Full Name (Last, First, Middle Initial)

Days Inn

Mailing Address 4400 Connecticut, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Hotel for DC event

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27166

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

159.16

**C.**

Full Name (Last, First, Middle Initial)

Days Inn

Mailing Address 4400 Connecticut, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Hotel for DC event

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27167

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

85.31

**SUBTOTAL** of Disbursements This Page (optional) .....

403.63

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 121 / 200

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Days Inn	<b>Transaction ID:</b> SB21B.27168 <b>Date of Disbursement</b>
Mailing Address 4400 Connecticut, NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 7 / 2 0 0 7</div> </div>
City Washington State DC Zip Code 20008	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Hotel for DC event Candidate Name	<div> <div>316.32</div> <div>002 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Days Inn	<b>Transaction ID:</b> SB21B.27169 <b>Date of Disbursement</b>
Mailing Address 4400 Connecticut, NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 7 / 2 0 0 7</div> </div>
City Washington State DC Zip Code 20008	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Hotel for DC event Candidate Name	<div> <div>244.47</div> <div>002 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Delta Airlines	<b>Transaction ID:</b> SB21B.27555 <b>Date of Disbursement</b>
Mailing Address PO Box 20537	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 7</div> </div>
City Atlanta State GA Zip Code 30320	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Diane to US Social forum Candidate Name	<div> <div>438.80</div> <div>002 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**999.59**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 122 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Dem Store

Mailing Address 5104 Macarthur Blvd. NW

City  
Washington

State  
DC

Zip Code  
20016

Purpose of Disbursement  
Buttons/bumper stickers

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27170

Date of Disbursement

01 / 10 / 2007

Amount of Each Disbursement this Period

1043.33

**B.**

Full Name (Last, First, Middle Initial)

Dem Store

Mailing Address 5104 Macarthur Blvd. NW

City  
Washington

State  
DC

Zip Code  
20016

Purpose of Disbursement  
Lapel stickers

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27171

Date of Disbursement

05 / 07 / 2007

Amount of Each Disbursement this Period

1106.23

**C.**

Full Name (Last, First, Middle Initial)

Embassy Suites

Mailing Address 333 Madonna Rd.

City  
San Luis Obispo

State  
CA

Zip Code  
93405

Purpose of Disbursement  
Hotel for Deputy Director

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27562

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

292.97

**SUBTOTAL** of Disbursements This Page (optional) .....

2442.53

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 123 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Embassy Suites

Mailing Address 333 Madonna Rd.

City San Luis Obispo State CA Zip Code 93405

Purpose of Disbursement

Hotel for director

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27564

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

219.03

**B.**

Full Name (Last, First, Middle Initial)

Embassy Suites

Mailing Address 333 Madonna Rd.

City San Luis Obispo State CA Zip Code 93405

Purpose of Disbursement

Hotel processing fee

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27565

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

3.50

**C.**

Full Name (Last, First, Middle Initial)

Embassy Suites

Mailing Address 333 Madonna Rd.

City San Luis Obispo State CA Zip Code 93405

Purpose of Disbursement

Hotel processing fee

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27566

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

3.50

**SUBTOTAL** of Disbursements This Page (optional) .....

226.03

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 124 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Embassy Suites

Mailing Address 333 Madonna Rd.

City San Luis Obispo State CA Zip Code 93405

Purpose of Disbursement

Hotel for director

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27567

Date of Disbursement

06 / 14 / 2007

Amount of Each Disbursement this Period

775.80

B.

Full Name (Last, First, Middle Initial)

Epicurean & Co.

Mailing Address 4250 Connecticut Ave., NW

City Washington State DC Zip Code 20008

Purpose of Disbursement

Food for DC event

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27187

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

440.00

C.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City Tempe State AZ Zip Code 85284

Purpose of Disbursement

Judy Pope to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27190

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

293.00

SUBTOTAL of Disbursements This Page (optional) .....

1508.80

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 125 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Laura to DC

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27191

Date of Disbursement

03 / 01 / 2007

Amount of Each Disbursement this Period

392.60

B.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Laura to DC

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27192

Date of Disbursement

03 / 01 / 2007

Amount of Each Disbursement this Period

5.00

C.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27238

Date of Disbursement

04 / 06 / 2007

Amount of Each Disbursement this Period

11.60

SUBTOTAL of Disbursements This Page (optional) .....

409.20

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 126 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27239 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	0		2	0	0	7												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">5.40</td> </tr> </table>	5.40																			
5.40																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27240 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	2		2	0	0	7												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">14.70</td> </tr> </table>	14.70																			
14.70																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27241 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	3		2	0	0	7												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.60</td> </tr> </table>	2.60																			
2.60																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

22.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 127 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27242 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	7		2	0	0	7												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">7.20</td> </tr> </table>	7.20																			
7.20																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27243 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	9		2	0	0	7												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.70</td> </tr> </table>	2.70																			
2.70																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27244 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	3		2	0	0	7												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">4.20</td> </tr> </table>	4.20																			
4.20																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

14.10

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 128 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27245

Date of Disbursement

M M / D D / Y Y Y Y  
0 4 / 2 4 / 2 0 0 7

Amount of Each Disbursement this Period

4.30

B.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27246

Date of Disbursement

M M / D D / Y Y Y Y  
0 4 / 2 6 / 2 0 0 7

Amount of Each Disbursement this Period

2.40

C.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27247

Date of Disbursement

M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 7

Amount of Each Disbursement this Period

6.00

SUBTOTAL of Disbursements This Page (optional) .....

12.70

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 129 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27248

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

4.50

**B.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27249

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

7.80

**C.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27250

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

11.00

**SUBTOTAL** of Disbursements This Page (optional) .....

23.30

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 130 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27251

Date of Disbursement

M M / D D / Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

Amount of Each Disbursement this Period

17.80

B.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27252

Date of Disbursement

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

Amount of Each Disbursement this Period

2.90

C.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27253

Date of Disbursement

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

Amount of Each Disbursement this Period

2.10

SUBTOTAL of Disbursements This Page (optional) .....

22.80

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 131 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27254 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	8		2	0	0	7												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">14.90</td> </tr> </table>	14.90																			
14.90																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27255 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	0		2	0	0	7												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.90</td> </tr> </table>	2.90																			
2.90																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27256 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	1		2	0	0	7												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.40</td> </tr> </table>	2.40																			
2.40																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

20.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 132 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City Spokane State WA Zip Code 99202

Purpose of Disbursement

Gateway

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27257

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

3.00

**B.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City Spokane State WA Zip Code 99202

Purpose of Disbursement

Gateway

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27258

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

5.00

**C.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City Spokane State WA Zip Code 99202

Purpose of Disbursement

Gateway

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27259

Date of Disbursement

05 / 16 / 2007

Amount of Each Disbursement this Period

4.10

**SUBTOTAL** of Disbursements This Page (optional) .....

12.10

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 133 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27260 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	7		2	0	0	7												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td>31.10</td> </tr> </table>	31.10																			
31.10																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27261 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	8		2	0	0	7												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00																			
10.00																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27262 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	1		2	0	0	7												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td>7.00</td> </tr> </table>	7.00																			
7.00																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**48.10**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 134 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27263

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

6.80

**B.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27264

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

4.30

**C.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27265

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

2.40

**SUBTOTAL** of Disbursements This Page (optional) .....

13.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 135 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27266

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

3.00

**B.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27267

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

11.60

**C.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27568

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

3.40

**SUBTOTAL** of Disbursements This Page (optional) .....

18.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 136 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27569

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

2.40

**B.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27570

Date of Disbursement

06 / 05 / 2007

Amount of Each Disbursement this Period

5.60

**C.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27571

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

11.60

**SUBTOTAL** of Disbursements This Page (optional) ▶

19.60

**TOTAL** This Period (last page this line number only) ▶



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 137 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Fast Charge</p> <p>Mailing Address 3107 E. Mission</p> <p>City Spokane State WA Zip Code 99202</p> <p>Purpose of Disbursement Gateway 001</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B.27572</p> <p>Date of Disbursement</p> <p>06 / 07 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>3.90</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Fast Charge</p> <p>Mailing Address 3107 E. Mission</p> <p>City Spokane State WA Zip Code 99202</p> <p>Purpose of Disbursement Gateway 001</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B.27573</p> <p>Date of Disbursement</p> <p>06 / 11 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>2.20</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Fast Charge</p> <p>Mailing Address 3107 E. Mission</p> <p>City Spokane State WA Zip Code 99202</p> <p>Purpose of Disbursement Gateway 001</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B.27574</p> <p>Date of Disbursement</p> <p>06 / 12 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>6.90</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

13.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 138 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27575

Date of Disbursement

06 / 14 / 2007

Amount of Each Disbursement this Period

2.70

B.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27576

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

3.40

C.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27577

Date of Disbursement

06 / 19 / 2007

Amount of Each Disbursement this Period

5.10

**SUBTOTAL** of Disbursements This Page (optional) .....

11.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 139 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27578 <b>Date of Disbursement</b>								
Mailing Address 3107 E. Mission	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 1 / 2 0 0 7</div> </div>								
<table border="1"> <tr> <td>City Spokane</td> <td>State WA</td> <td>Zip Code 99202</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Gateway</td> <td rowspan="2">001 Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Spokane	State WA	Zip Code 99202	Purpose of Disbursement Gateway		001 Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <div>2.20</div>
City Spokane	State WA	Zip Code 99202							
Purpose of Disbursement Gateway		001 Category/ Type							
Candidate Name									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27579 <b>Date of Disbursement</b>								
Mailing Address 3107 E. Mission	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 0 7</div> </div>								
<table border="1"> <tr> <td>City Spokane</td> <td>State WA</td> <td>Zip Code 99202</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Gateway</td> <td rowspan="2">001 Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Spokane	State WA	Zip Code 99202	Purpose of Disbursement Gateway		001 Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <div>8.00</div>
City Spokane	State WA	Zip Code 99202							
Purpose of Disbursement Gateway		001 Category/ Type							
Candidate Name									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.27580 <b>Date of Disbursement</b>								
Mailing Address 3107 E. Mission	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 6 / 2 0 0 7</div> </div>								
<table border="1"> <tr> <td>City Spokane</td> <td>State WA</td> <td>Zip Code 99202</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Gateway</td> <td rowspan="2">001 Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Spokane	State WA	Zip Code 99202	Purpose of Disbursement Gateway		001 Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <div>6.20</div>
City Spokane	State WA	Zip Code 99202							
Purpose of Disbursement Gateway		001 Category/ Type							
Candidate Name									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								

**SUBTOTAL** of Disbursements This Page (optional) .....

16.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 140 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27581

Date of Disbursement

06 / 27 / 2007

Amount of Each Disbursement this Period

3.30

**B.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27582

Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

2.10

**C.**

Full Name (Last, First, Middle Initial)

Lila Garrett

Mailing Address 10390 Wilshire Blvd.

City  
Los Angeles

State  
CA

Zip Code  
90024

Purpose of Disbursement  
Reimbursement for catering

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27522

Date of Disbursement

04 / 24 / 2007

Amount of Each Disbursement this Period

1080.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1085.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 141 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Giant Food

Mailing Address Corporate Headquarters

City Landover State MD Zip Code 20785

Purpose of Disbursement  
Food for Leadership Conference

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: SB21B.27273

Date of Disbursement

03 / 23 / 2007

Amount of Each Disbursement this Period

429.58

B.

Full Name (Last, First, Middle Initial)

Giant Food

Mailing Address Corporate Headquarters

City Landover State MD Zip Code 20785

Purpose of Disbursement  
Food for Leadership Conference

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: SB21B.27274

Date of Disbursement

03 / 23 / 2007

Amount of Each Disbursement this Period

22.00

C.

Full Name (Last, First, Middle Initial)

Giant Food

Mailing Address Corporate Headquarters

City Landover State MD Zip Code 20785

Purpose of Disbursement  
Food for Leadership Conference

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: SB21B.27275

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

228.84

SUBTOTAL of Disbursements This Page (optional) .....

680.42

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 142 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Giant Food

Mailing Address Corporate Headquarters

City Landover State MD Zip Code 20785

Purpose of Disbursement  
Food for Leadership Conference

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27276

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

121.90

**B.**

Full Name (Last, First, Middle Initial)

Giant Food

Mailing Address Corporate Headquarters

City Landover State MD Zip Code 20785

Purpose of Disbursement  
Food for Leadership Conference

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27277

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

25.90

**C.**

Full Name (Last, First, Middle Initial)

Giant Food

Mailing Address Corporate Headquarters

City Landover State MD Zip Code 20785

Purpose of Disbursement  
Food for Leadership Conference

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27278

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

20.20

**SUBTOTAL** of Disbursements This Page (optional) .....

168.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 143 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Great Concepts Press

Mailing Address 3003 E. Kings Ave.

City  
Phoenix

State  
AZ

Zip Code  
85032

Purpose of Disbursement  
Banner and Donation envelopes

Candidate Name

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27279

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

728.00

B.

Full Name (Last, First, Middle Initial)

GTC Telecom

Mailing Address PO Box 3824

City  
South Pasadena

State  
CA

Zip Code  
91031

Purpose of Disbursement  
Director Cell Phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27587

Date of Disbursement

06 / 20 / 2007

Amount of Each Disbursement this Period

22.25

C.

Full Name (Last, First, Middle Initial)

Judith A. Hess

Mailing Address 2265 Annadale Way

City  
Chula Vista

State  
CA

Zip Code  
91915

Purpose of Disbursement  
Hall Rental

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27305

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional) .....

1150.25

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 144 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Judith A. Hess

Mailing Address 2265 Annadale Way

City Chula Vista State CA Zip Code 91915

Purpose of Disbursement  
Reimbursement for long distance phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27306

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

271.18

**B.**

Full Name (Last, First, Middle Initial)

Hotel Harrington

Mailing Address 436 11th St. NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Hotel Rooms for DC events

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27292

Date of Disbursement

01 / 30 / 2007

Amount of Each Disbursement this Period

532.94

**C.**

Full Name (Last, First, Middle Initial)

Hotel Harrington

Mailing Address 436 11th St. NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Hotel Rooms for DC events

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27294

Date of Disbursement

01 / 30 / 2007

Amount of Each Disbursement this Period

343.89

**SUBTOTAL** of Disbursements This Page (optional) .....

1148.01

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 145 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Hotel Harrington

Mailing Address 436 11th St. NW

City  
Washington

State  
DC

Zip Code  
20004

Purpose of Disbursement  
Hotel Rooms for DC events

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27295

Date of Disbursement

01 / 31 / 2007

Amount of Each Disbursement this Period

286.89

B.

Full Name (Last, First, Middle Initial)

Hotel Harrington

Mailing Address 436 11th St. NW

City  
Washington

State  
DC

Zip Code  
20004

Purpose of Disbursement  
Hotel Rooms for DC events

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27296

Date of Disbursement

01 / 31 / 2007

Amount of Each Disbursement this Period

169.63

C.

Full Name (Last, First, Middle Initial)

Hotel Harrington

Mailing Address 436 11th St. NW

City  
Washington

State  
DC

Zip Code  
20004

Purpose of Disbursement  
Hotel Rooms for DC events

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27297

Date of Disbursement

01 / 31 / 2007

Amount of Each Disbursement this Period

149.43

**SUBTOTAL** of Disbursements This Page (optional) .....

605.95

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 146 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) J&R Graphics and Printing	<b>Transaction ID:</b> SB21B.27299 <b>Date of Disbursement</b>																				
Mailing Address 2540 N. 35th Ave., Ste. 6	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	7												
City Phoenix State AZ Zip Code 85009	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Invitations for Phx. fundraiser Candidate Name	<table border="1"> <tr> <td colspan="10">1367.46</td> </tr> </table>	1367.46																			
1367.46																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) K & K Fiduciary	<b>Transaction ID:</b> SB21B.27307 <b>Date of Disbursement</b>																				
Mailing Address 1712 Magnavox Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	0		2	0	0	7												
City Fort Wayne State IN Zip Code 46804	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Insurance for event Candidate Name	<table border="1"> <tr> <td colspan="10">383.00</td> </tr> </table>	383.00																			
383.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) David Keeler	<b>Transaction ID:</b> SB21B.27554 <b>Date of Disbursement</b>																				
Mailing Address 188 S. Debra Ct.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	6		2	0	0	7												
City Gilbert State AZ Zip Code 85296	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Consulting work/phone calling Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

2250.46

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 147 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Kinko's

Mailing Address 8325 W. Bell Rd.

City  
Peoria

State  
AZ

Zip Code  
85382

Purpose of Disbursement  
Press kit copies

Candidate Name

004

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27317

Date of Disbursement

04 / 26 / 2007

Amount of Each Disbursement this Period

151.88

**B.**

Full Name (Last, First, Middle Initial)

Lichtman, Trister and Ross

Mailing Address 1666 Connecticut Ave. NW, Ste. 500

City  
Washington

State  
DC

Zip Code  
20009

Purpose of Disbursement  
Old debt for legal advice

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27326

Date of Disbursement

01 / 19 / 2007

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Lichtman, Trister and Ross

Mailing Address 1666 Connecticut Ave. NW, Ste. 500

City  
Washington

State  
DC

Zip Code  
20009

Purpose of Disbursement  
Old debt for legal advice

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27327

Date of Disbursement

02 / 20 / 2007

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

651.88

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Lichtman, Trister and Ross	<b>Transaction ID:</b> SB21B.27328 <b>Date of Disbursement</b>
Mailing Address 1666 Connecticut Ave. NW, Ste. 500	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 0 / 2 0 0 7</div> </div>
City Washington State DC Zip Code 20009	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Old debt for legal advice Candidate Name	<div> <div>250.00</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Lichtman, Trister and Ross	<b>Transaction ID:</b> SB21B.27329 <b>Date of Disbursement</b>
Mailing Address 1666 Connecticut Ave. NW, Ste. 500	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 0 / 2 0 0 7</div> </div>
City Washington State DC Zip Code 20009	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Old debt for legal advice Candidate Name	<div> <div>250.00</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Lichtman, Trister and Ross	<b>Transaction ID:</b> SB21B.27330 <b>Date of Disbursement</b>
Mailing Address 1666 Connecticut Ave. NW, Ste. 500	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 8 / 2 0 0 7</div> </div>
City Washington State DC Zip Code 20009	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Old debt for legal advice Candidate Name	<div> <div>250.00</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**750.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 149 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Papa John's Pizza

Mailing Address 2525 Pennsylvania Ave. NW

City  
WashingtonState  
DCZip Code  
20037

Purpose of Disbursement

Food for event

Candidate Name

003

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Transaction ID: SB21B.27341

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	7

Amount of Each Disbursement this Period

204.49

B.

Full Name (Last, First, Middle Initial)

PrintGlobe

Mailing Address 4115 Freidrich Lane, Suite 200

City  
AustinState  
TXZip Code  
78744

Purpose of Disbursement

ImpeachMints order

Candidate Name

003

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Transaction ID: SB21B.27343

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	0	7

Amount of Each Disbursement this Period

400.00

C.

Full Name (Last, First, Middle Initial)

PrintGlobe

Mailing Address 4115 Freidrich Lane, Suite 200

City  
AustinState  
TXZip Code  
78744

Purpose of Disbursement

ImpeachMints order

Candidate Name

003

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Transaction ID: SB21B.27345

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	1	/	2	0	0	7

Amount of Each Disbursement this Period

605.00

SUBTOTAL of Disbursements This Page (optional) .....

1209.49

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 150 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

PrintGlobe

Mailing Address 4115 Freidrich Lane, Suite 200

City Austin State TX Zip Code 78744

Purpose of Disbursement  
ImpeachMints order

Candidate Name

003  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27346

Date of Disbursement

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Amount of Each Disbursement this Period

340.00

B.

Full Name (Last, First, Middle Initial)

PrintGlobe

Mailing Address 4115 Freidrich Lane, Suite 200

City Austin State TX Zip Code 78744

Purpose of Disbursement  
ImpeachMints order shipping

Candidate Name

003  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27592

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 0 1 / 2 0 0 7

Amount of Each Disbursement this Period

125.90

C.

Full Name (Last, First, Middle Initial)

PrintGlobe

Mailing Address 4115 Freidrich Lane, Suite 200

City Austin State TX Zip Code 78744

Purpose of Disbursement  
ImpeachMints order shipping

Candidate Name

003  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27593

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 7

Amount of Each Disbursement this Period

346.48

SUBTOTAL of Disbursements This Page (optional) ▶

812.38

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 151 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

PrintGlobe

Mailing Address 4115 Freidrich Lane, Suite 200

City Austin State TX Zip Code 78744

Purpose of Disbursement  
Impeachments order shipping

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27594

Date of Disbursement

06 / 19 / 2007

Amount of Each Disbursement this Period

173.24

B.

Full Name (Last, First, Middle Initial)

Quickbooks Online

Mailing Address online service - no address

City NA State CA Zip Code 00000

Purpose of Disbursement  
W2 fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27352

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

32.78

C.

Full Name (Last, First, Middle Initial)

Quickbooks Online

Mailing Address online service - no address

City NA State CA Zip Code 00000

Purpose of Disbursement  
W2 fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27595

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

32.78

SUBTOTAL of Disbursements This Page (optional) ▶

238.80

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 152 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Clarity Sanderson

Mailing Address 1564 Hidden Valley Dr.

City Sandy State UT Zip Code 84092

Purpose of Disbursement  
March Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27144

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Clarity Sanderson

Mailing Address 1564 Hidden Valley Dr.

City Sandy State UT Zip Code 84092

Purpose of Disbursement  
April Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27145

Date of Disbursement

04 / 16 / 2007

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Clarity Sanderson

Mailing Address 1564 Hidden Valley Dr.

City Sandy State UT Zip Code 84092

Purpose of Disbursement  
April Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27146

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 153 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Clarity Sanderson

Mailing Address 1564 Hidden Valley Dr.

City Sandy State UT Zip Code 84092

Purpose of Disbursement

May Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27147

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Clarity Sanderson

Mailing Address 1564 Hidden Valley Dr.

City Sandy State UT Zip Code 84092

Purpose of Disbursement

May Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27550

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Clarity Sanderson

Mailing Address 1564 Hidden Valley Dr.

City Sandy State UT Zip Code 84092

Purpose of Disbursement

June Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27551

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) .....

750.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 154 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Diane Shamis

**Transaction ID:** SB21B.27172

Date of Disbursement

/   /

Mailing Address c/o Community Vision  
3808 34th St.

City State Zip Code  
Mt. Rainier MD 20712

Amount of Each Disbursement this Period

Purpose of Disbursement

March Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)

Diane Shamis

**Transaction ID:** SB21B.27174

Date of Disbursement

/   /

Mailing Address c/o Community Vision  
3808 34th St.

City State Zip Code  
Mt. Rainier MD 20712

Amount of Each Disbursement this Period

Purpose of Disbursement

March Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)

Diane Shamis

**Transaction ID:** SB21B.27175

Date of Disbursement

/   /

Mailing Address c/o Community Vision  
3808 34th St.

City State Zip Code  
Mt. Rainier MD 20712

Amount of Each Disbursement this Period

Purpose of Disbursement

April Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 155 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Diane Shamis

Transaction ID: SB21B.27176

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	0	7

Mailing Address c/o Community Vision  
3808 34th St.

City Mt. Rainier State MD Zip Code 20712

Amount of Each Disbursement this Period

Purpose of Disbursement

April Salary

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

500.00

B.

Full Name (Last, First, Middle Initial)

Diane Shamis

Transaction ID: SB21B.27177

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	0	7

Mailing Address c/o Community Vision  
3808 34th St.

City Mt. Rainier State MD Zip Code 20712

Amount of Each Disbursement this Period

Purpose of Disbursement

May Salary

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

500.00

C.

Full Name (Last, First, Middle Initial)

Diane Shamis

Transaction ID: SB21B.27178

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	7

Mailing Address c/o Community Vision  
3808 34th St.

City Mt. Rainier State MD Zip Code 20712

Amount of Each Disbursement this Period

Purpose of Disbursement

May Salary

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 156 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Diane Shamis

**Transaction ID:** SB21B.27556

Date of Disbursement

06 / 01 / 2007

Mailing Address c/o Community Vision  
3808 34th St.

City Mt. Rainier State MD Zip Code 20712

Purpose of Disbursement  
May Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Diane Shamis

**Transaction ID:** SB21B.27557

Date of Disbursement

06 / 15 / 2007

Mailing Address c/o Community Vision  
3808 34th St.

City Mt. Rainier State MD Zip Code 20712

Purpose of Disbursement  
June Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Diane Shamis

**Transaction ID:** SB21B.27558

Date of Disbursement

06 / 29 / 2007

Mailing Address c/o Community Vision  
3808 34th St.

City Mt. Rainier State MD Zip Code 20712

Purpose of Disbursement  
June Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 157 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Tim to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27371

Date of Disbursement

01 / 16 / 2007

Amount of Each Disbursement this Period

234.80

B.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Tim to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27372

Date of Disbursement

01 / 24 / 2007

Amount of Each Disbursement this Period

213.80

C.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Tim to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27373

Date of Disbursement

02 / 23 / 2007

Amount of Each Disbursement this Period

134.40

SUBTOTAL of Disbursements This Page (optional) .....

583.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 158 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Ed Asner to Phx

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27374

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

69.40

B.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Cindy Asner to Phx

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27375

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

69.40

C.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Tim to CA

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27376

Date of Disbursement

03 / 09 / 2007

Amount of Each Disbursement this Period

98.40

SUBTOTAL of Disbursements This Page (optional) .....

237.20

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 159 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Tim to MA

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27377

Date of Disbursement

03 / 09 / 2007

Amount of Each Disbursement this Period

98.40

B.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Tim to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27378

Date of Disbursement

03 / 09 / 2007

Amount of Each Disbursement this Period

59.40

C.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Flight change fee

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27379

Date of Disbursement

03 / 16 / 2007

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional) .....

182.80

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Tim to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27380

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

59.00

B.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Tim to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27381

Date of Disbursement

03 / 29 / 2007

Amount of Each Disbursement this Period

238.80

C.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Tim to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27382

Date of Disbursement

04 / 09 / 2007

Amount of Each Disbursement this Period

238.80

SUBTOTAL of Disbursements This Page (optional) ▶

536.60

TOTAL This Period (last page this line number only) ▶



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Southwest Airlines	<b>Transaction ID:</b> SB21B.27383 <b>Date of Disbursement</b>
Mailing Address PO Box 36647 - 1CR	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 7</div> </div>
City Dallas State TX Zip Code 75235	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Sherry to San Diego Candidate Name	<div> <div>167.80</div> <div>002</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Southwest Airlines	<b>Transaction ID:</b> SB21B.27384 <b>Date of Disbursement</b>
Mailing Address PO Box 36647 - 1CR	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 8 / 2 0 0 7</div> </div>
City Dallas State TX Zip Code 75235	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Tim to DC Candidate Name	<div> <div>119.40</div> <div>002</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Southwest Airlines	<b>Transaction ID:</b> SB21B.27385 <b>Date of Disbursement</b>
Mailing Address PO Box 36647 - 1CR	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 3 / 2 0 0 7</div> </div>
City Dallas State TX Zip Code 75235	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Sherry to CA Candidate Name	<div> <div>154.80</div> <div>002</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**442.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 162 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Tim to CA

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27386

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

267.20

B.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Tim to CA

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27387

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

237.20

C.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Tim - CA to Boston

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27599

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

293.80

SUBTOTAL of Disbursements This Page (optional) .....

798.20

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 163 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Tim - CA to Boston

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27600

Date of Disbursement

06 / 19 / 2007

Amount of Each Disbursement this Period

242.80

B.

Full Name (Last, First, Middle Initial)

Kevin Spidel

Mailing Address 14250 Wigwam Blvd. #1113

City  
Litchfield Park

State  
AZ

Zip Code  
85340

Purpose of Disbursement  
Reimbursement for cell phone

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27309

Date of Disbursement

01 / 05 / 2007

Amount of Each Disbursement this Period

203.79

C.

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 10310 N. 91st. Ave.

City  
Peoria

State  
AZ

Zip Code  
85345

Purpose of Disbursement  
Supplies for conference

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27394

Date of Disbursement

03 / 20 / 2007

Amount of Each Disbursement this Period

142.86

SUBTOTAL of Disbursements This Page (optional) .....

589.45

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 10310 N. 91st. Ave.

City  
Peoria

State  
AZ

Zip Code  
85345

Purpose of Disbursement  
Supplies for convention

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27395

Date of Disbursement

04 / 19 / 2007

Amount of Each Disbursement this Period

43.91

B.

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 10310 N. 91st. Ave.

City  
Peoria

State  
AZ

Zip Code  
85345

Purpose of Disbursement  
Supplies for convention

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27396

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

34.40

C.

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 10310 N. 91st. Ave.

City  
Peoria

State  
AZ

Zip Code  
85345

Purpose of Disbursement  
Mailing supplies

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27397

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

149.31

SUBTOTAL of Disbursements This Page (optional) .....

227.62

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 10310 N. 91st. Ave.

City  
Peoria

State  
AZ

Zip Code  
85345

Purpose of Disbursement  
Mailing supplies

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27398

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

141.87

**B.**

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 10310 N. 91st. Ave.

City  
Peoria

State  
AZ

Zip Code  
85345

Purpose of Disbursement  
Mailing supplies

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27399

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

40.67

**C.**

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 10310 N. 91st. Ave.

City  
Peoria

State  
AZ

Zip Code  
85345

Purpose of Disbursement  
Mailing supplies

Candidate Name

004

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27601

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

11.89

**SUBTOTAL** of Disbursements This Page (optional) .....

194.43

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Stones Phones

Mailing Address 121 S. Palm Canyon Dr., Suite 205

City State Zip Code  
Palm Springs CA 92262

Purpose of Disbursement

PDA Call Program

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27602

Date of Disbursement

06 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Stones Phones

Mailing Address 121 S. Palm Canyon Dr., Suite 205

City State Zip Code  
Palm Springs CA 92262

Purpose of Disbursement

PDA Call Program

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27603

Date of Disbursement

06 / 25 / 2007

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

The Data Bank

Mailing Address 800 Washington Ave., North

City State Zip Code  
Minneapolis MN 55401

Purpose of Disbursement

Data base downpayment/contract

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27402

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

6500.00

SUBTOTAL of Disbursements This Page (optional) .....

9000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 167 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

TMobile

Mailing Address PO Box 37380

City Albuquerque State NM Zip Code 87176

Purpose of Disbursement

Cell phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27410

Date of Disbursement

02 / 16 / 2007

Amount of Each Disbursement this Period

216.48

B.

Full Name (Last, First, Middle Initial)

TMobile

Mailing Address PO Box 37380

City Albuquerque State NM Zip Code 87176

Purpose of Disbursement

Cell phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27411

Date of Disbursement

03 / 13 / 2007

Amount of Each Disbursement this Period

95.29

C.

Full Name (Last, First, Middle Initial)

TMobile

Mailing Address PO Box 37380

City Albuquerque State NM Zip Code 87176

Purpose of Disbursement

Cell phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27412

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

201.84

SUBTOTAL of Disbursements This Page (optional) .....

513.61

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

TMobile

Mailing Address PO Box 37380

City Albuquerque State NM Zip Code 87176

Purpose of Disbursement

Cell phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27413

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

65.00

**B.**

Full Name (Last, First, Middle Initial)

TMobile

Mailing Address PO Box 37380

City Albuquerque State NM Zip Code 87176

Purpose of Disbursement

Cell phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27414

Date of Disbursement

03 / 29 / 2007

Amount of Each Disbursement this Period

5.00

**C.**

Full Name (Last, First, Middle Initial)

TMobile

Mailing Address PO Box 37380

City Albuquerque State NM Zip Code 87176

Purpose of Disbursement

Cell phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27415

Date of Disbursement

04 / 16 / 2007

Amount of Each Disbursement this Period

103.56

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

173.56

**TOTAL** This Period (last page this line number only) ..... ►



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

TMobile

Mailing Address PO Box 37380

City Albuquerque State NM Zip Code 87176

Purpose of Disbursement

Cell phone

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27416

Date of Disbursement

04 / 20 / 2007

Amount of Each Disbursement this Period

214.54

**B.**

Full Name (Last, First, Middle Initial)

TMobile

Mailing Address PO Box 37380

City Albuquerque State NM Zip Code 87176

Purpose of Disbursement

Cell phone

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27417

Date of Disbursement

04 / 25 / 2007

Amount of Each Disbursement this Period

247.24

**C.**

Full Name (Last, First, Middle Initial)

TMobile

Mailing Address PO Box 37380

City Albuquerque State NM Zip Code 87176

Purpose of Disbursement

Cell phone

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27418

Date of Disbursement

05 / 18 / 2007

Amount of Each Disbursement this Period

74.35

**SUBTOTAL** of Disbursements This Page (optional) .....

536.13

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 170 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

TMobile

Mailing Address PO Box 37380

City  
Albuquerque

State  
NM

Zip Code  
87176

Purpose of Disbursement  
Cell phone PDA Ops

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27606

Date of Disbursement

06 / 07 / 2007

Amount of Each Disbursement this Period

208.90

B.

Full Name (Last, First, Middle Initial)

TMobile

Mailing Address PO Box 37380

City  
Albuquerque

State  
NM

Zip Code  
87176

Purpose of Disbursement  
Cell phone - PDA ops

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27607

Date of Disbursement

06 / 19 / 2007

Amount of Each Disbursement this Period

197.36

C.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi Island

State  
WA

Zip Code  
98262

Purpose of Disbursement  
Web services

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27419

Date of Disbursement

01 / 02 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

906.26

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 171 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b>	Full Name (Last, First, Middle Initial) Turtle Island Web Design	<b>Transaction ID:</b> SB21B.27420 <b>Date of Disbursement</b> <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	0	9	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	1	/	0	9	/	2	0	0	7													
	Mailing Address PO Box 10																					
	City Lummi Island State WA Zip Code 98262	<b>Amount of Each Disbursement this Period</b> <table border="1"><tr><td>149.00</td></tr></table>	149.00																			
149.00																						
	Purpose of Disbursement Web services	<table border="1"><tr><td>001</td></tr></table>	001																			
001																						
	Candidate Name	Category/Type																				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																				
	State: District:	<input type="checkbox"/> Other (specify) ▼																				
<b>B.</b>	Full Name (Last, First, Middle Initial) Turtle Island Web Design	<b>Transaction ID:</b> SB21B.27421 <b>Date of Disbursement</b> <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	0	2	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	0	2	/	2	0	0	7													
	Mailing Address PO Box 10																					
	City Lummi Island State WA Zip Code 98262	<b>Amount of Each Disbursement this Period</b> <table border="1"><tr><td>320.00</td></tr></table>	320.00																			
320.00																						
	Purpose of Disbursement Web services	<table border="1"><tr><td>001</td></tr></table>	001																			
001																						
	Candidate Name	Category/Type																				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																				
	State: District:	<input type="checkbox"/> Other (specify) ▼																				
<b>C.</b>	Full Name (Last, First, Middle Initial) Turtle Island Web Design	<b>Transaction ID:</b> SB21B.27422 <b>Date of Disbursement</b> <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	0	6	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	0	6	/	2	0	0	7													
	Mailing Address PO Box 10																					
	City Lummi Island State WA Zip Code 98262	<b>Amount of Each Disbursement this Period</b> <table border="1"><tr><td>599.00</td></tr></table>	599.00																			
599.00																						
	Purpose of Disbursement Web services	<table border="1"><tr><td>001</td></tr></table>	001																			
001																						
	Candidate Name	Category/Type																				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																				
	State: District:	<input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1068.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 172 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi IslandState  
WAZip Code  
98262Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27423

Date of Disbursement

02 / 09 / 2007

Amount of Each Disbursement this Period

49.00

B.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi IslandState  
WAZip Code  
98262Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27424

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

320.00

C.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi IslandState  
WAZip Code  
98262Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27425

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

450.00

SUBTOTAL of Disbursements This Page (optional) ▶

819.00

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 173 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Turtle Island Web Design	<b>Transaction ID:</b> SB21B.27426 <b>Date of Disbursement</b>																				
Mailing Address PO Box 10	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	8		2	0	0	7												
City Lummi Island State WA Zip Code 98262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Web services	<table border="1"> <tr> <td>610.00</td> </tr> </table>	610.00																			
610.00																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Turtle Island Web Design	<b>Transaction ID:</b> SB21B.27427 <b>Date of Disbursement</b>																				
Mailing Address PO Box 10	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	8		2	0	0	7												
City Lummi Island State WA Zip Code 98262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Web services	<table border="1"> <tr> <td>149.00</td> </tr> </table>	149.00																			
149.00																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Turtle Island Web Design	<b>Transaction ID:</b> SB21B.27428 <b>Date of Disbursement</b>																				
Mailing Address PO Box 10	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	4		2	0	0	7												
City Lummi Island State WA Zip Code 98262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Web services	<table border="1"> <tr> <td>450.00</td> </tr> </table>	450.00																			
450.00																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1209.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 174 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City Lummi Island State WA Zip Code 98262

Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27429

Date of Disbursement

04 / 04 / 2007

Amount of Each Disbursement this Period

450.00

B.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City Lummi Island State WA Zip Code 98262

Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27430

Date of Disbursement

04 / 04 / 2007

Amount of Each Disbursement this Period

149.00

C.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City Lummi Island State WA Zip Code 98262

Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27431

Date of Disbursement

04 / 16 / 2007

Amount of Each Disbursement this Period

450.00

SUBTOTAL of Disbursements This Page (optional) ▶

1049.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 175 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City Lummi Island State WA Zip Code 98262

Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27432

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

450.00

B.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City Lummi Island State WA Zip Code 98262

Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27433

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

149.00

C.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City Lummi Island State WA Zip Code 98262

Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27434

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

287.50

SUBTOTAL of Disbursements This Page (optional) ►

886.50

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 176 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi IslandState  
WAZip Code  
98262Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27435

Date of Disbursement

M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

Amount of Each Disbursement this Period

287.50

B.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi IslandState  
WAZip Code  
98262Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27436

Date of Disbursement

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Amount of Each Disbursement this Period

450.00

C.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi IslandState  
WAZip Code  
98262Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27437

Date of Disbursement

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Amount of Each Disbursement this Period

1350.00

SUBTOTAL of Disbursements This Page (optional) .....

2087.50

TOTAL This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 177 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi IslandState  
WAZip Code  
98262Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27438

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

149.00

B.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi IslandState  
WAZip Code  
98262Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27608

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

450.00

C.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi IslandState  
WAZip Code  
98262Purpose of Disbursement  
Web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27609

Date of Disbursement

06 / 16 / 2007

Amount of Each Disbursement this Period

599.00

SUBTOTAL of Disbursements This Page (optional) ▶

1198.00

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 178 / 200

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) US Airways Mailing Address PO Box 1501	<b>Transaction ID:</b> SB21B.27441 <b>Date of Disbursement</b> <div> <div>02</div> <div>26</div> <div>2007</div> </div>
City Winston-Salem State NC Zip Code 27102 Purpose of Disbursement Ed Asner to Phx Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>123.40</div>
<b>B.</b> Full Name (Last, First, Middle Initial) US Airways Mailing Address PO Box 1501 City Winston-Salem State NC Zip Code 27102 Purpose of Disbursement Cindy Asner to Phx Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.27442 <b>Date of Disbursement</b> <div> <div>02</div> <div>26</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>123.40</div>
<b>C.</b> Full Name (Last, First, Middle Initial) US Airways Mailing Address PO Box 1501 City Winston-Salem State NC Zip Code 27102 Purpose of Disbursement Tim from LA to DC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.27443 <b>Date of Disbursement</b> <div> <div>03</div> <div>09</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>273.30</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**520.10**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 179 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

US Airways

Mailing Address PO Box 1501

City  
Winston-Salem

State  
NC

Zip Code  
27102

Purpose of Disbursement  
Flight change fee

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27444

Date of Disbursement

03 / 09 / 2007

Amount of Each Disbursement this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

US Airways

Mailing Address PO Box 1501

City  
Winston-Salem

State  
NC

Zip Code  
27102

Purpose of Disbursement  
Tim to Boston

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27445

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

293.40

**C.**

Full Name (Last, First, Middle Initial)

US Airways

Mailing Address PO Box 1501

City  
Winston-Salem

State  
NC

Zip Code  
27102

Purpose of Disbursement  
Tim to Phx

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27446

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

349.40

**SUBTOTAL** of Disbursements This Page (optional) .....

742.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 180 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

US Airways

Mailing Address PO Box 1501

City  
Winston-Salem

State  
NC

Zip Code  
27102

Purpose of Disbursement  
Flight change fee

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27447

Date of Disbursement

03 / 21 / 2007

Amount of Each Disbursement this Period

100.00

B.

Full Name (Last, First, Middle Initial)

US Airways

Mailing Address PO Box 1501

City  
Winston-Salem

State  
NC

Zip Code  
27102

Purpose of Disbursement  
flight change fee

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27448

Date of Disbursement

03 / 21 / 2007

Amount of Each Disbursement this Period

86.00

C.

Full Name (Last, First, Middle Initial)

US Airways

Mailing Address PO Box 1501

City  
Winston-Salem

State  
NC

Zip Code  
27102

Purpose of Disbursement  
Sherry to TX

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27610

Date of Disbursement

06 / 27 / 2007

Amount of Each Disbursement this Period

346.80

SUBTOTAL of Disbursements This Page (optional) .....

532.80

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 181 / 200

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Postage to mail DVDs

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27455

Date of Disbursement

01 / 23 / 2007

Amount of Each Disbursement this Period

77.20

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing merch and dvds

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27456

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

20.78

C.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing merch and dvds

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27457

Date of Disbursement

02 / 02 / 2007

Amount of Each Disbursement this Period

8.10

**SUBTOTAL** of Disbursements This Page (optional) .....

106.08

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement

Mailing merch and dvds

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27458

Date of Disbursement

02 / 06 / 2007

Amount of Each Disbursement this Period

28.80

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement

Mailing merch and dvds

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27459

Date of Disbursement

02 / 20 / 2007

Amount of Each Disbursement this Period

16.20

C.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement

Mailing merch and online store orders

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27460

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

43.53

SUBTOTAL of Disbursements This Page (optional) .....

88.53

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement

Mailing merch and online store orders

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27461

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

8.10

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement

Mailing merch and online store orders

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27462

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

8.10

C.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement

Mailing fundraiser invitations

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27463

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

234.00

SUBTOTAL of Disbursements This Page (optional) .....

250.20

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Online store mailing

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27464

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

16.20

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Online store mailing

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27465

Date of Disbursement

03 / 29 / 2007

Amount of Each Disbursement this Period

67.53

C.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Online store mailing

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27466

Date of Disbursement

04 / 05 / 2007

Amount of Each Disbursement this Period

102.20

SUBTOTAL of Disbursements This Page (optional) ▶

185.93

TOTAL This Period (last page this line number only) ▶



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 185 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing supplies to CA for events

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27467

Date of Disbursement

04 / 09 / 2007

Amount of Each Disbursement this Period

56.70

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing supplies to CA for events

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27468

Date of Disbursement

04 / 12 / 2007

Amount of Each Disbursement this Period

14.40

C.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Online store mailing

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27469

Date of Disbursement

04 / 16 / 2007

Amount of Each Disbursement this Period

14.40

SUBTOTAL of Disbursements This Page (optional) .....

85.50

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 186 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand RapidsState  
MIZip Code  
49505Purpose of Disbursement  
Online store mailing

Candidate Name

003  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27470

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

134.00

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand RapidsState  
MIZip Code  
49505Purpose of Disbursement  
Online store mailing

Candidate Name

003  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27471

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

194.80

C.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand RapidsState  
MIZip Code  
49505Purpose of Disbursement  
Online store mailing

Candidate Name

003  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27472

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

349.64

SUBTOTAL of Disbursements This Page (optional) .....

678.44

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 187 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Online store mailing

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27473

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

101.25

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Online store mailing

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27474

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

31.70

C.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing online store orders

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27611

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

17.35

SUBTOTAL of Disbursements This Page (optional) .....

150.30

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing online store orders

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27612

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

26.85

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing online store orders

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27613

Date of Disbursement

06 / 07 / 2007

Amount of Each Disbursement this Period

18.15

C.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing online store orders

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27614

Date of Disbursement

06 / 07 / 2007

Amount of Each Disbursement this Period

4.60

**SUBTOTAL** of Disbursements This Page (optional) .....

49.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 189 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing online store orders

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27615

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

23.00

**B.**

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing online store orders

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27616

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

22.50

**C.**

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing online store orders

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.27617

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

41.50

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

87.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 190 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing online store orders

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27618

Date of Disbursement

06 / 19 / 2007

Amount of Each Disbursement this Period

44.81

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing online store orders

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27619

Date of Disbursement

06 / 19 / 2007

Amount of Each Disbursement this Period

41.00

C.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing online store orders

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27620

Date of Disbursement

06 / 25 / 2007

Amount of Each Disbursement this Period

13.80

SUBTOTAL of Disbursements This Page (optional) .....

99.61

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand RapidsState  
MIZip Code  
49505Purpose of Disbursement  
Mailing online store orders

Candidate Name

003  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27621

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 2 5 / 2 0 0 7

Amount of Each Disbursement this Period

4.60

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand RapidsState  
MIZip Code  
49505Purpose of Disbursement  
Mailing online store orders

Candidate Name

003  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27622

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 7

Amount of Each Disbursement this Period

92.80

C.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand RapidsState  
MIZip Code  
49505Purpose of Disbursement  
Mailing online store orders

Candidate Name

003  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27623

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 0 7

Amount of Each Disbursement this Period

16.25

SUBTOTAL of Disbursements This Page (optional) ▶

113.65

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Mailing online store orders

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27624

Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

8.70

B.

Full Name (Last, First, Middle Initial)

Velvet Revolution

Mailing Address PO Box 9576

City  
Washington

State  
DC

Zip Code  
20016

Purpose of Disbursement  
Palm card flyers

Candidate Name

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27475

Date of Disbursement

04 / 09 / 2007

Amount of Each Disbursement this Period

900.00

C.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO Box 489

City  
Newark

State  
NJ

Zip Code  
07101

Purpose of Disbursement  
Cell phone for director

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27477

Date of Disbursement

02 / 06 / 2007

Amount of Each Disbursement this Period

338.07

**SUBTOTAL** of Disbursements This Page (optional) .....

1246.77

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 193 / 200

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO Box 489

City  
Newark

State  
NJ

Zip Code  
07101

Purpose of Disbursement

Cell phone for director

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27478

Date of Disbursement

03 / 06 / 2007

Amount of Each Disbursement this Period

321.14

B.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO Box 489

City  
Newark

State  
NJ

Zip Code  
07101

Purpose of Disbursement

Cell phone for director

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27479

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

107.49

C.

Full Name (Last, First, Middle Initial)

Walmart

Mailing Address 3721 E. Thomas Rd.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement

Postage

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.27481

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

210.36

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

638.99

**TOTAL** This Period (last page this line number only) ..... ►

123843.92

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Lynne M. Banta

Mailing Address 1443 N. Ave 49

City  
Los AngelesState  
CAZip Code  
90042

Purpose of Disbursement

Refund of donation

Candidate Name

010

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Transaction ID: SB28A.34296

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	0	7

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

2000.00

Form/Schedule: **F3XA**

Transaction ID:

All fundraising activities were to raise money for the organization, not for any political candidates. All donors with addresses outside of the country are US citizens. This organization is operated by staff from their homes therefore no office space is rented or utilities required. Telephone and internet services, office equipment, supplies and salaries are the main administrative expenses incurred by this organization. A majority of our work is done through travel and events and over the internet. All expenses have been adequately disclosed. Our report discloses a negative ending cash balance of \$7,279.61. We have recently discovered that this is due to an accounting error. We have recently assigned this task to new staff and are in the process of locating and correcting this error. When it is resolved, we will file an amended report. We have the bank statements as evidence that we have always operated in a positive cash balance and we do not owe any debts at this time.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.264151**

The original amount for this expense was \$368.43. It was adjusted to reflect a refund of contributions that was made to Linda Stich on December 16, 2006 for the amount of \$10.00 and to Beverly Anne Williams on December 14, 2006 for \$10.00 and again on December 14, 2006 for \$10.00.

**Image# 28991203092**

Form/Schedule: **SB21B** Original vendor was USPS, 4949 E. Van Buren, Phoenix, AZ 85026

Transaction ID: **SB21B.26404**

Form/Schedule: **SB21B** Original vendor: Cox Communication, PO Box 78071, Phoenix, AZ, 85062 for cell phone and wireless internet.

Transaction ID: **SB21B.27525**

\*\*\*\*\*

**Image# 28991203093**

Form/Schedule: **SB21B** Original vendor was Delta Airlines, Inc., PO Box 20706, Atlanta, GA, 30320-6001 for airfare.

Transaction ID: **SB21B.27521**

Form/Schedule: **SB21B** Original vendor was Verizon, PO Box 17120, Tucson, AZ, 82320.

Transaction ID: **SB21B.27526**

\*\*\*\*\*

**Image# 28991203094**

Form/Schedule: **SB21B** Original vendor was Verizon, PO Box 17120, Tucson, AZ, 82320.

Transaction ID: **SB21B.27605**

Form/Schedule: **SB21B** Original vendors: Ramada Inn, 830 6th Ave., San Diego, CA, 92101 for \$318.32 for hotel room and Delta Airline-  
Transaction ID: **SB21B.27520** Inc., PO Box 20706, Atlanta, GA 30320-6001 for \$290.30 for plane ticket.

\*\*\*\*\*

Image# 28991203095

Form/Schedule: **SB21B**      Original vendor was Back on Broadway, 2024 Broadway, Santa Monica, CA, 90404.  
Transaction ID: **SB21B.27522**

Form/Schedule: **SB21B**      Original vendor was Cox Communications, PO Box 78071, Phoenix, AZ, 85062 for long distance phone calls.  
Transaction ID: **SB21B.27306**

**Image# 28991203096**

Form/Schedule: **SB21B** Original vendor was T-Mobile, PO Box 37380, Albuquerque, NM, 87176 for cell phone.

Transaction ID: **SB21B.27309**

\*\*\*\*\*